

Credit Card Payment Form Authorisation

To: Viet Sinh Transportation & Travel Service Co.,Ltd
16/1 Phan Ngu, F.Dakao, District 1, HCM City Vietnam
Tel : 84-8-8201757 , 84-8-8205233 Fax : 84-8-8205234

Should you have any questions, please send us enquiry to **sales@vietsinko.com**

Full Name _____ Hotel/Service Ref No. _____

A) Mark the appropriate box with an X:

1. UC 2. Master Card 3. VISA 4. JCB 5. American Express

B) Card Number: _____ **(3 Digit CCV Number) :** _____

C) Expiration date: Year / Month _____

D) Full name of holder as it appears on the card (Please type clearly):

E) Amount is _____ **US DOLLAR**

F) Amount in words _____

G) Credit Card Billing Address:

Street _____ City _____

State _____ P.O Box _____ Country _____

Phone _____ E-mail _____

Signature _____ **Date** _____