PAYMENT AUTHORIZATION FORM

Please attach copies (both side) of your credit card and passport.

Card Holder Name :

Card Holder Passport No. :

Date of Issue :

Date of Expiry :

Card Holder Address :

Phone Number :

Fax :

Number of accompanying pages with this fax : (including this page)

I, _____ , hereby authorize, **Supratman Samsi** from ***Sembilan Pulau***
(your name)

Tour Comapany to charge $ _____ USD to my credit card

Card Number : ☐ Visa ☐ Master Card

☐☐☐☐☐ – ☐☐☐☐☐ – ☐☐☐☐☐ – ☐☐☐☐☐

Expiration date : ☐☐ Date ☐☐ Month ☐☐☐☐ Year

CC CODE : ☐☐☐☐☐

This amount is payment for the following service(s) :

Name(s) of Accommodation(s) / Package(s)		**Amount (USD)**
Tour Service Charge	**%**	
TOTAL		USD

By signing this authorization payment form, I agree to pay the stated amount to **Supratman Samsi** of ***Sembilan Pulau Tour Company*.**

_____ (Card Holder Signature)

_____ (Date)