Written Consent To Charge Credit Card Account.

			Date:
Dear: Sir / Madam, RE: Letter of Authoriza	tion		
My name is:			
Credit Bank:			
Credit Card Type	: Visa		
	☐ Master Card		MM YY
Credit Card No:			Expired Date:
Hereby, to authorize P	erfect Resources (Thaila	and) Co., Ltd. to cha	arge amount of
THB	()
Address (Inform Bank)	House No	Village	e No
Lane/Alley	Road	Sub-Di	strict
District.	Province	Count	ry
Postcode	Tel		
I certify that all signature of the credi	·	ete and accurate a	nd that I am the authorized
	You Fa	ithfully,	
			nature of Cardholder. rdholder name in print.
	ure must correspond with t attatch a photocopy of th	•	e on the card. If above both front and back.



(For First Time)





- Please also attach the Photocopy of the Cardholder's Passport.



