## **Credit Card Authorisation Form**

To:

Al-Insaan Sdn. Bhd. (687722-A)

Verified by

No.25-1, Jalan SP 2/4, Taman Serdang Perdana, Sek.2, 43300 Seri kembangan, Selangor Darul Ehsan, Malaysia.

Re:	Credit	Card	Autho	risation	Form

I hereby authorised Al-Insaan Sdn. Bhd. to immediately debit RMproducts.	as a payment to purchases Al-Insaan					
Please charge the total above said amount to my Visa/ Master Card as indic	rated below:					
Issuing Bank Visa/	Master					
Name (as per I/C / Passport):						
Credit Card Expiry Date: Last 3 digits No: (Behind Credit card)						
I/C./ Passport No:						
Contact No: (0)						
Sales Order Number:						
* Please revert the completed form to the address below by email or via facsimile to the number: 03 - 5021 9322(Sales & Distribution)						
Name : Al-Insaan Sdn. Bhd Address : No.25-1, Jalan SP 2/4, Taman Serdang Perdana, Sek.2, 43300 Seri kembangan, Selangor Darul Ehsan, Malaysia. Tel :03 - 8941 8822 Fax :03 - 8941 3322  DECLARATION BY CARD HOLDER						
* I declare that my credit limit is always have enough sufficient funds to make the above payment, else I would abide any discrepancy. *I declare the above information is valid upon my agreement after signing on this letter.						
	Date:					
Signature as per on credit card						
For Distributor Use:						
	Received by :					
*Please attach together with the photocopy I/C & credit card.						
FOR OFFICE USE:						
, t	Approval code :					