

PAYMENTAUTHORISATION FORM

	<u>C</u> ards are accepted. Visa □ Master	
Card Holder's Na		
Card Number:		
	(mm/yy) Expiry Date:	
Issue Number:	(If applicable)	
Security Code:	(Last three(3) digits at the back of th	e card on the signature strip)
Billing Address:		
Tel:	Fax:	
Email:		
	Card: To be finalized once the visa is issued by Schedule of fees stated on the following page.	
·	e CVASC to charge my account for payment f	for my
Chinese visa appli	cation and related services.	
Payment in full is	I acknowledge the charges described hereon. to be made when billed in accordance with the st l fees are non-refundable.	andard policy of the card issue
i um uvure that a	ND AGREED TO THESE TERMS AND CONDI	TIONS.
	nature:	

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