AUTHORIZATION TO CHARGE MY CREDIT CARD

AAA SERVICE CENTER
P.O. BOX: 10101
DUBAI – U.A.E.
TEL: 04-2858989 FAX: 04-2850303
Email: info@aaadubai.com

Date_____

PLEASE CHARGE AN AMOUNT OF DHS. _____ ON MY VISA/MASTER CARD WITH THE FOLLOWING DETAILS. I AUTHORISE THIS CHARGE ON MY CREDIT CARD AGAINST MY PAYMENT TOWARDS UNPAID INVOICES/JOB ADVANCE

INVOICE NOS/JOB NOS_____ _____ _____

Name of Customer (As on the card)_____

Address (As given to Bank)

_____

_____

_____

Contact Tel (As given to Bank) _____ **Any other contact Tel**_____

Card No. ☐☐☐☐ ☐☐☐☐ ☐☐☐☐ ☐☐☐☐

Expiry: ☐☐☐☐ **Card holder signature**_____

3 Digit Code as on the back of the card (CVV Code) ☐☐☐