Govt. Regd. No: 20/457/56



	Date:
Dear Sir / Madam,	
Re: Authorization for the Payment by Credit Card.	
I would like to pay US\$ For the purchase	
Expeditions Private Limited. By my VISA / MASTER tion are as below:	R CARD. The necessary details for this transac-
Card Number:	
Expiry Date:	
Amount:	
Identification No:	
Billing Address:	
Enclosed here are the copy of my Credit Card (both sid	e) and the copy of my identification (passport)
along with this request letter. Thank you for your kind of	co-operation.
Regards,	
Signature of the Cardholder:	
Name of the Cardholder	
Nationality: P	assport no:
Address of Cardholder:	
Tel no: F	ax:
Email:	
Please send me the conformation by Fax or by Telepho	ne or by Email.
Privacy: All information contained herein is used solely	by Earthbound Expeditions Private Limited for

Note: Please add 3.5% extra bank charge on credit card payment.

Please fax this authorization form at +977 - 1 - 4700874

purposes of charging on your credit card and will not be released under any circumstances.