CREDIT CARD PAYMENT AUTHORIZATION FORM 信用咭付款授權書

	I牌號碼
Account No. Fleet Card No./Vehicle No	
NAME OF PARTY TO BE CREDITED (THE BENEFICIARY) 收款之一方 (受益人) PIONEER DYNAMIC LIMITED 鋒生有限公司	
I hereby authorize my below named Bank to effect transfers from my credit card account to that of the above named beneficiary in accordance with such instructions as my Bank may receive from the beneficiary daily. This authorization shall have effect until further notice. This authorization shall have effect after the expiry date of the credit card stated below.	本人現授權本人下述之發咭銀行,根據受益人每日給予本人下 述之發咭銀行之指示自本人之信用咭賬戶內扣取本人之貨款及 有關費用予上述受益人。 本授權書將繼續生效直至另行通知為止。 本授權書於下列信用咭有效期後仍然生效。
Credit Card Number 信用咭號碼	Expiry Date 有效期至 L/
Credit Card Holder's Name (must match the name printed on the credit card) 信用咭持有人之英文姓名(必須與咭上姓名相同)	
Issuing Bank 發咭銀行	MasterCard Card Holder's Signature 信用咭持有人簽署
Contact Phone Number 聯絡電話	
Please send completed form to us by post or by FAX: 2191 9121. 填妥之表格, 請傳真至(FAX: 2191 9121) 或寄回本公司.	
FOR COMPANY USE ONLY 以下由本公司填寫 NAME OF CUSTOMER 客戶姓名 BEBTOR'S REFERENCE 客戶備註	DATE OF COMPLETION 填寫日期 完成簽署