

Chinese Visa Office

Credit Card Order Form

First and Last name of the passport holder(s): _____

Billing Information

Credit Card Type: Visa MasterEctf " " " " " " " " F k e q x g t

Credit Card Number: _____

Expiration Date: _____

Amount: _____

Card Identifier (CVV/CVC number): _____
(CVC number is the last three digit numbers on the back of credit card)

Payment by Credit Card: Credit card payment is subject to a \$6.00 per application for processing charge.

Card Billing Address

Card Holder First Name: _____

Card Holder Last Name: _____

Billing Address: _____

City: _____

State/Province: _____

Zip/Postal Code: _____

Phone Number: _____

I have read and agreed to the terms and conditions listed on www.visa-chinese.com. I understand all fees are non-refundable. I authorize Chinese Visa Office to charge the amount due to my credit card.

Signature: _____

Date: _____

Tel: 713-774-5606, Fax: 713-800-5606

Email: office@visa-chinese.com

website: www.visa-chinese.com