		Date:
To, Alpine Card Services Durbarmarg,Kathma Nepal		
Dear Madam/Sir,		
RE: Authorization for	or the Pay	ment by Credit Card
I would like to pay]usd [NPR INR (Amount in words:
	ages to M) for the purpose on the start lodge, by my Visa / MasterCard. The action are as below:
Name of the Cardhol	der	
Credit Card Number:		
Card Expiry Date:		
Amount in Figure:		
Amount in Words:		
ID No. (P.P or I.D):		
C/H's Date of Birth:		
Statement Address:		
CVC No.:		AUTHORISED SIGNATURE 4560 1234 5678 9123 XXX
Thank you for your c	o-operatior	ո.
Regards,		

Note: Please verify amount. You need to present the same credit card at the time of check in.

Cardholder's signature