



Company Name:

Sales Order/ Invoice #

Cardholder Letter of Acceptance

I _____ Authorized user of credit card # _____

Exp date _____ Security Code _____ Billing Zip Code _____

CARDHOLDER AGREES THAT HIS/HER SIGNATURE ON THIS FORM CONSTITUTES AN AGREEMENT TO PAY 25% DEPOSIT, BALANCE DUE AND FREIGHT CHARGES TO THE CREDIT CARD NUMBER PROVIDED AND SHOWN ABOVE.

CARD HOLDER UNDERSTANDS THAT THE AMOUNT CHARGED TO THIS CREDIT CARD MAY BE DIFFERENT FROM THE SALES ORDER/INVOICE BALANCE PRIOR TO PRODUCT SHIPPING OR FREIGHT CHARGES ARE APPLIED.

I authorize my bank to release the funds mentioned below to the merchant SilkRoute International so that my account can be credited for the order listed below. I attest that the information is correct, and understand that in case of any dispute or chargeback, that this form will serve as proof that the card was charged with my full knowledge and consent.

Cardholder Signature: _____ Date _____

For security purposes, Silkroute International will NOT retain credit card information.

NOTICE TO CARDHOLDER: IF ANY CHANGES ON ORDER OR PRODUCT IS NOT AVAILABLE AT TIME OF SHIPPING SILKROUTE WILL NOTIFY CUSTOMER OF SUCH CHANGES PRIOR TO FINILIZE TRANSACTION.

*****Please complete form and fax back to Silkroute*****

(510) 383-9576 or email to: kim@shopsilkroute.com