



CREDIT CARD AUTHORIZATION LETTER

I, _____, hereby, authorize eTechsol/2CHECKOUT to charge my credit card for the **Net Total** amount as detailed below:

Order Detail		
No.	Description	US\$
	Total	
	Less Discount Amount	
	Net Total	

Credit Card Information

Credit Card Number _____ Expiry Date _____ CVV2/CVC _____
 Name (as it appears on the card) _____
 Address _____
 City _____ State _____ Zip Code _____ Country _____
 Phone No. _____ Email Address _____

I understand that I will be charged US Dollars equal to the sum stated/indicated as "**Net Total**" above. The card issuer is authorized to pay the amount indicated as "**Net Total**" upon proper presentation. I acknowledge receipt of goods and services in the amount above. I affirm my obligations under the Card Member Agreement.

Signature _____ Date _____
 (Card Holder)

NOTE:
PLEASE ATTACH ELEGIBLE PHOTOCOPY OF YOUR MOST CURRENT CREDIT CARD STATEMENT OR PHOTOCOPY OF CREDIT CARD ITSELF (BOTH SIDES) WITH THIS LETTER AND FAX IT TO THE NUMBER BELOW (NO COVER PAGE IS NECESSARY). THIS IS REQUIRED TO VERIFY YOUR IDENTITY. FAXES WITHOUT SAID ATTACHMENT WILL NOT BE ENTERTAINED.

**PLEASE RETURN FAX TO: +1 703-935-7672
 ATTENTION: CREDIT DEPARTMENT**