



**TO:** KURNIA INSURANS (MALAYSIA) BERHAD

**BRANCH:** SELANGOR  
No. 149-151, Jalan Maharajalela  
50150 Kuala Lumpur

**DATE:** \_\_\_\_\_

**FROM:** \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**A/C NO:** \_\_\_\_\_

**PAYMENT AUTHORISARTION INSTRUCTION (PAI)**

I \_\_\_\_\_ hereby authorize you to charge RM \_\_\_\_\_  
(Card holder's name)  
to my credit card:

**Card Type** :  VISA  MASTER CARD

**Credit Card No** :

**Expiring Date** :   **Month**     **Year**

**Issuing Bank** : \_\_\_\_\_

\_\_\_\_\_  
Card holder's signature

**Strictly one authorization slip for each batch/ cover note  
Must be attached to submission sheet**

**FOR OFFICE USE**  
**BATCH(ES) / COVER NOTE(S) NO:**

**FAX TO:**  
**CHRISA COMPANY**  
**TEL: 7885 0505**  
**FAX: 7885 0303**  
**EMAIL: info@chrisa.com.my**