

MAIL ORDER FORM

To : SHUMS & SONS TRAVELS LTD - COLOMBO
Fax No. : 00 94 11 2507289 / 00 94 11 2503619

Please debit my Card Account for the goods ordered. Details are as follows:

Name :
Card No. :
Name of the Issuing Bank :
Expiry Date :
CVV II / CVC II No. :

(The last three digits following the card number indented at the back of the card on the signature panel)

Telephone No. :
E-mail Address :
Mailing Address :
.....
.....
.....
Mother's Maiden Name :
Amount :

.....
Signature

(Kindly fax this form along with clear copies of your Passport and both sides of your Credit Card.)