

ORDER FORM

HSIN PAO HANG ENTERPRISE CO., LTD.

17F. NO.630-6, TA-YO RD., TAOYUAN, TAIWAN, R.O.C.

TEL:+886-3-3565679 FAX:+886-3-3566365

DATE: _____

email:hsinpao@seed.net.tw

CUSTOMER: _____

NAME OF CARD HOLDER (if different): _____

ADDRESS: _____

PHONE: _____

SHIP VIA: UPS FEDEX DHL EMS OTHERS

ITEM	DESCRIPTION	QUANTITY	UNIT PRICE	AMOUNT
THANK YOU FOR YOUR ORDER.			SUB-TOTAL	
			Shipping & Handling	
			TOTAL (US\$)	

KIND OF CARD (VISA, MASTER CARD) _____

CREDIT CARD NUMBER _____ EXP. DATE: _____

NAME OF CARD ISSUED BANK _____

CVV2 CODE _____

(last 3-digit is printed on the signature panel on the backside of cards)

TOTAL AMOUNT TO BE CHARGED _____

I hereby authorize HSIN PAO HANG Enterprise Co., Ltd. to charge the above credit card for the amount indicated.

X _____
Authorized Signature (as it appears on credit card)