

To: Malaysian Institute of Accountants (MIA)  
 Finance Department  
 Dewan Akauntan, No. 2 & 4  
 Jalan Tun Sambanthan 3  
 Brickfields  
 50470 Kuala Lumpur  
 Fax No: 03 – 2273 7533

Dear Sir / Madam,

**CREDIT CARD PAYMENT AUTHORISATION LETTER**

I, \_\_\_\_\_, hereby authorise MIA to charge RM\_\_\_\_\_ to my credit card as follows for the payment of:-

(✓ tick whichever applicable)

- |   |   |
|---|---|
| <input type="checkbox"/> Entrance Fee                   | <input type="checkbox"/> Readmission Fees                                     |
| <input type="checkbox"/> Practising Certificate fee     | <input type="checkbox"/> Annual membership subscription and donation to MAREF |
| <input type="checkbox"/> Annual membership subscription | <input type="checkbox"/> Reclassification Fee                                 |

owing by \_\_\_\_\_(Name); \_\_\_\_\_(Membership No.)  
 \_\_\_\_\_(Tel No.) \_\_\_\_\_(E-mail Address)

A. The details of my primary credit card are as follows:	Please provide details of your second credit card (we will charge this credit card when your primary card is declined by the Bank)
Bank : _____	Bank : _____
Card* : VISA / MASTERCARD	Card* : VISA / MASTERCARD
Card No (16 digits) : ____ - ____ - ____ - ____	Card No (16 digits) : ____ - ____ - ____ - ____
Card expiry date : ____ / ____ (mm / yy)	Card expiry date : ____ / ____ (mm / yy)

- B. Auto debit for future payment\* :**
- Annual subscription of RM250
  - Practising Certificate Fee of RM250
  - Donation to MAREF of RM50

Please tick (✓)

<input type="checkbox"/>
<input type="checkbox"/>
<input type="checkbox"/>

Yours sincerely,

\_\_\_\_\_  
 (Signature as per credit card)  
 Date: \_\_\_\_\_

**Note:** Members who wish to pay via credit card, please complete the details required in the Credit Card Authorisation Letter fax / mail the said letter to the Institute.