

## **AUTO DEBIT CANCELLATION FORM**

CUSTOMER ACCOUNT INFORMATION	
Gas Malaysia account n Name on Gas Bill Address on Gas Bill	o. :
Contact no. (HP) : Contact no. (H) : Contact no. (O) :	
AUTO DEBIT CANCELLATION DECLARATION	
I hereby wish to cancel auto debit for the above account number. My credit card details are as follows:-	
Primary Credit Card Acc	ount
Credit Card No	
Name on credit card (exactly as printed)	
Issuing Bank	:
Issuing Country	:
Credit card expiry date	:
Signature	:
Secondary Credit Card A	Account
Credit Card No	
Name on credit card	:
(exactly as printed)	
Issuing Bank	:
Issuing Country	:
Credit card expiry date	:
Signature	: