

Unitedstars International Inc. Check Draft Authorization Form

Date: 4/22/2011 Travel Consultant: Amy
I, Liu Xiang, authorize Unitedstars International Inc. to initiate funds from the checking
Client Name
account indicated below. I also authorize my depository financial institution to honor these transfers.

Please Check Box (required)

<input type="checkbox"/>	This authorization is valid for this transaction only. The transaction amount will be \$ <u>999.40</u> (transaction amount required)
Passengers' Names: 乘客姓名: <u>LIU XIANG</u>	
Client Contact Tel: <u>607 262 6699</u> Cell: _____ Fax: _____	
Email: <u>liuxiang1027@gmail.com</u> Home Address <u>201 Maple Ave, 68C, Ithaca, NY 14850</u>	


I have read and agree to all of the terms and conditions on this page and any other contract or document that accompanies this agreement. I certify that I am the authorized account holder for this checking account. I understand this is a binding agreement and I will receive a copy of each check draft in my statement when the item has cleared.

I understand this is a legal binding agreement between USI International Inc. and, Liu Xiang,
Client Name

I understand that all returned checks are subject to a \$35.00 NSF Fee. This agreement will remain in effect until
I, Liu Xiang, receive USI International Inc. written notice of cancellation via fax or email.
Client Name

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Authorized Accountholder Signature (required)

4/22/2011
Date (required)

LIU XIANG XL336@CORNELL.EDU 607 262 6699		0992 1-32/210 NY 25437
<u>4/22/2011</u> Date		
Pay To The Order Of <u>Unitedstars International Inc.</u>		\$ <u>999.40</u>
<u>Nine Hundreds and Ninety-nine Dollars Forty Cents only</u>		Dollars
Bank of America		 Security Features Details on Back
ACH R/T 021000322		
<u>8 day US West Coast Trip</u>		<u>21 翔</u> MP
⑆021000322⑆ 483033606836⑈0992		

Harland Clarke