

# SATYAAM INC

## REFUND REQUEST FORM

All Fields are compulsory

Name of Traveller : First Name  Middle Name  Last Name

Ticket # :

Date of Travel :

Method of Paymet : ☐ Check ☐ Cash

Credit Card : ☐ Visa ☐ Master ☐ Discover ☐ Amex

Reason for Cancelation :