



## Authorization Agreement for One-time Credit Card Payment for an Official Transcript

Please charge \$\_\_\_\_\_ to the credit card listed below.

Visa       Master Card       American Express       Discover/Novus

Card number: \_\_\_\_\_

Expiration date: \_\_\_\_\_ Security code: \_\_\_\_\_

Student name: \_\_\_\_\_ Student ID #: \_\_\_\_\_

Card holder name (if different than student): \_\_\_\_\_

Signature of card holder: \_\_\_\_\_ Date: \_\_\_\_\_