GLENDALE COMMUNITY COLLEGE DISTRICT

Fiscal Services
1500 NORTH VERDUGO ROAD, ROOM NO. AD116
GLENDALE, CALIFORNIA 91208
818-240-1000, Ext. 5209

CREDIT CARD AUTHORIZATION FORM

NAME/COMPANY ON CREDIT CARD:			
CREDIT CARD NUMBER :			
CREDIT CARD TYPE:	☐ Visa	☐	☐ Discover
EXPIRATION DATE: MONTH/YEAR		3 DIGIT SECURITY CODE	
PAYMENT FOR:			
CARD BILLING ADDRESS:			
EMAIL ADDRESS:			
TELEPHONE/CELL PHONE NO. :			
AMOUNT TO BE CHARGED:			
I AUTHORIZE THE ABOVE AMOUNT TO BE CHARGED TO THE CREDIT CARD LISTED .			
NAME OF PERSON SIGNING			
SIGNATURE			