



Credit Card Authorization

Name: _____

Student Number: _____

Charge amount: _____

Credit card number*: _____

Expiration date: _____

Card holder signature: _____

* Mastercard, Visa and American Express are accepted cards. Visa debit is not accepted.

Fax completed form to: 416-978-2487

Questions? Phone: 416-978-3384, Email: transcripts@utoronto.ca

<p>Office Use Only:</p> <p>Payment processed by: _____</p> <p>Hold removed (if applicable): Yes_____ N/A_____</p>
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