CHARLTON BROWN.

CREDIT CARD PAYMENT FORM (office use only)

Attach this form to you application/request

You must ensure that the amount due stated below is consistent with the fee payable on your tax invoice.

PART A	Card Deta	ils			
Card Type	Mastercar	d		Visa]
Card Number					
Expiry Date				CVV Co	de
Cardholders Name (As it appears on the card)					
PART B	Card Hold	er's Det	ails		
Cardholders Address					
City				State	
Post Code				Country	/
Email				Phone	
PART C	Amount D	ue			
Total Amount	AUD \$ Credit Card transaction fee of 1.1% will be added to the payment amount. By using this payment service, you agree to having this additional amount charged to your account.				
PART D	Authorisation				
I authorise Charlton B that I am over 18 year		it my cr	edit card wi	th the amount s	shown above. I certify
Cardholder's Signatur	e:			Date:	_//
Office Use Only:					
Student ID					
Application/Request r	eference				
Receipt Number:				Date Processed:	