

***FHSU Student Fiscal Services
Credit Card Information***

Account Name _____ Account Number _____

Date _____ Name of Cardholder _____

Home Phone # _____ Work Phone # _____

{ } Visa
{ } MasterCard Amount \$ _____
{ } Discover
{ } American Express

Credit Card # _____ Expiration Date ____/____

Item(s) being purchased: _____

Departmental and Activity accounts will be charged the transaction fee per item, merchant fees based on percentage of sales, charge back fees, and any additional charges. These charges will be deducted from the account each month upon receipt of the credit card statement.

Effective 04/20/04

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