

**Hartnell Community College
Credit Card Purchase Approval**

VISA/MC Cardholder Name_____

Cardholder's Signature_____

Sale Amount \$_____

Card #_____exp._____CVC#_____

CVC# is the last three numbers located on the signature strip of the credit card.

Cardholder Address, including zip code:

Telephone number:

Student Name_____I.D#/SSN_____

***PLEASE FAX ALONG WITH YOUR
TRANSCRIPT REQUEST FORM
TO 831-759-6014***