



MISSISSIPPI VALLEY STATE
UNIVERSITY™

Mississippi Valley State University
Consent to Charge Credit/Debit Card

I give Mississippi Valley State University, Office of Business and Finance permission to charge my credit/debit card for the following amount \$_____ for the following services:

1. To pay on/off my student account
2. To purchase a transcript, pay fines, etc.
3. Other _____

Student Name:		
Address:		
City/St/Zip:		
Contact Number:	Student ID :	
Email:		
Name on Credit Card:	/Type CC:	
CC No.	/Expiration:	/3Digit Code:
Signature:	/Date	

*Note: A copy of valid driver's license with a signature must accompany all credit/debit card transactions.

Authorized Used Only:	
Signature:	Date: