

# PRESERVICE CREDIT CARD PAYMENTS



CONTACT NAME: \_\_\_\_\_ PHONE #: \_\_\_\_\_

SCHOOL DISTRICT/COMPANY: \_\_\_\_\_

DRIVERS/CLASS: *(Add Below)*

INVOICE# \_\_\_\_\_

EMAIL ADDRESS: *(For receipt)* \_\_\_\_\_

AMOUNT: \_\_\_\_\_

- |                      |  |
|----------------------|--|
| PRESERVICE - \$88.50 | (COST IS \$85 WHEN PAYING WITH CHECK/PO) |
| RECERT - \$62.50     | (COST IS \$60 WHEN PAYING WITH CHECK/PO) |
| VAN CERT - \$62.50   | (COST IS \$60 WHEN PAYING WITH CHECK/PO) |
| ADVANCE - \$93.50    | (COST IS \$90 WHEN PAYING WITH CHECK/PO) |
| INSERVICE - \$52.00  | (COST IS \$50 WHEN PAYING WITH CHECK/PO) |



CARD (CHECK) \_\_\_\_\_ VISA *or* \_\_\_\_\_ MASTERCARD

NAME ON CARD: \_\_\_\_\_

CARD NUMBER: \_\_\_\_\_ EXPIRATION DATE: \_\_\_\_\_

SECURITY CODE ON BACK: \_\_\_\_\_

ZIP CODE: \_\_\_\_\_

**Please Email or Fax this Form to:**

[Schoolbus@staff.allencountyesc.org](mailto:Schoolbus@staff.allencountyesc.org) *or* Fax to 419.224.0718 *Attn:* Kathy