



1121 N. State College Blvd., Suite 238  
Fullerton, CA 92831



## CENTER FOR DEMOGRAPHIC RESEARCH CREDIT CARD PAYMENT AUTHORIZATION

**Your credit card statement will show a charge to CSU Fullerton ASC or Auxiliary Services Corporation (ASC)**

TO BE COMPLETED BY CUSTOMER

Company Name: \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Email: \_\_\_\_\_

Business Phone #: \_\_\_\_\_ Fax #: \_\_\_\_\_

Publication	Quantity	Unit Price	Amount
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\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**TOTAL:**

Charge to (Circle one):          MasterCard          Visa          American Express

Account #: \_\_\_\_\_

Exp. Date: \_\_\_\_\_

Amount: \_\_\_\_\_ \*CVV# \_\_\_\_\_

Print Name: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

\*Note: CVV# = 3 digit number code on back of card

### FOR DEPARTMENT USE ONLY

Deposit to CSUF ASC Account #:          52118914-6440          \_\_\_\_\_

Requested By

Date

(657) 278-3009          \_\_\_\_\_

(657) 278-5091          \_\_\_\_\_

Phone Number

Fax Number

Invoice Number

*Please Note:*

1. Keep signed copy in your department for backup.
2. The collected amount minus bank fee (2.5% for Visa/MasterCard and 3.5% for American Express) will be deposited to the ASC account.