

MARIA MONTESSORI

A C A D E M Y

education for a better world.



JA Biztown

Date: January 29, 2015

Student Donation: \$5.00

Quantity:

Item Subtotal: \$0.00

Total: \$0.00

Parent / Guardian Info

First Name: **Last Name:**

Address:

Address:

City:

State: **ZIP/Postal Code:**

Phone:

Email:

*Please be aware that Card Payments will show this transaction
as Schools 800-764-0844 Clinton, UT*

Payment Information



Convenience Fees: Credit cards: 3% plus \$0.50 (\$1.50 min)
(1.50% surcharge for foreign cards)

Credit Card Number: (Type number or swipe with cursor in this empty field)

Expiration Date: /

Card ID (CVV2/CID) Number: [What is the Card ID?](#)

Cardholder Information (exactly as it appears on your statement)

☐ Update from **Parent / Guardian Info**

Cardholder's Name:

Billing ZIP/Postal Code:

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