UNIVERSITY H CREDIT		PLACEMEN ORIZATION D		VICES
CLIENT'S NAME:				
CREDIT CARD TYPE: (Please circle)	N	laster Card	<u>OR</u>	VISA
CREDIT CARD NUMBER:				
EXPIRATION DATE:				
CARD HOLDER NAME:				
CARD HOLDER ADDRESS:				
PLACEMENT FEE:	\$225.00			
CONTINUATION FEE:		Not Ap	plicable	
LATE FEE:		Not Applicable		
PROCESSING FEE: (Fee charged by bank)	\$20.00			
TOTAL AMOUNT CHARGED:	\$245.00			
CURRENCY:	US DOLLA	ARS		
I,	ount to my cred		horize W	/ISE Student Travel
		TRAVEL SERV		
APPROVED: ()YES ()NO	D BY:			
AUTHORIZATION #:		DATE:		
REFERENCE #:				
AGENT: INV#		INV AMT		AMT PAID
INV BALANCE PLACE	MENT AMT	STIPEND AMT		HOLDING AMT