



Department of Public Safety and Correctional Services

Police and Correctional Training Commissions
6852 4th STREET • SYKESVILLE, MARYLAND 21784 • www.pctc.state.md.us
(410) 875-3400 • V/TTY (800) 735-2258 • E-MAIL: mailbox@mpctc.net

Credit Card Payment Information -FILE COPY

ONLY Cards Accepted

Charge my: \_\_\_ Visa
(CHECK ONE)

\_\_\_ Master Card

Card Type: \_\_\_ Personal Credit Card
(CHECK ONE)

\_\_\_ Business/Corporate Credit Card\*

COMPLETE AND FAX TO: FINANCE DEPT
410 875-3533

PLEASE TYPE OR PRINT CLEARLY

Name of Card Holder: \_\_\_\_\_
(AS IT APPEARS ON CREDIT CARD)

Card # \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ Expiration Date \_\_\_\_/\_\_\_\_ Amount VARIOUS
16 DIGITS MM/YY

Credit Card Statement Zip Code: \_\_\_\_\_ State: \_\_\_\_\_

Card Holders Signature: \_\_\_\_\_

Card Holders
Phone Number: \_\_\_\_\_

Agency Name: \_\_\_\_\_

If receipt is requested, please provide email: \_\_\_\_\_

\*NOTE: State Agencies must process RSTARS transfer. Credit card form
not accepted.