USC Bookstores

840 Childs Way, 3rd Floor, Los Angeles, CA 90089

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Credit Card Payment Form

Date: _____

USC Name: _____ email address: _____

USC ID Number: _____ (Student – Staff – Faculty)

Product name or Quote Number:

_____

_____

Total Charge: _____

Special Instructions:

_____

_____

CUT OFF AND SHRED BELOW AFTER TRANSACTION IS COMPLETE

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