

1. Payee

Name: _____

Doing business as (if applicable): _____

Mailing Address: _____

_____ Postal/Zip Code: _____

Phone: () _____ Cell: () _____

Fax: () _____

2. Credit Card Information



Payment Amount & Reason: (Canadian Dollars)

\$50 submission fee for application number _____ by _____

\$150 fee for appealing a Registrar's sanction

Other: \$ _____ for _____

Credit Card Number: _____ - _____ - _____ - _____

Expiry (mm/yyyy): ____ / ____

Name of Card Holder: _____

Signature of Card Holder: _____

Date: _____

Processing Information (OFFICE USE ONLY)

Information Quoted: Yes No

Information: _____

Operator ID: _____

Transaction No.: _____

Transaction Date: _____

Processed By: _____