



Credit Card Payment

Classification	ID	Revision	Effective Date
S-ADM-F	11411	4	10/29/2019 1:30:58 PM

Texas A&M Veterinary Medical Diagnostic Laboratory
 PO Drawer 3040, College Station TX 77841
Phone: 979-458-3207 • Fax: 979-458-3260 Visit our Web Site at tvmdl.tamu.edu

CREDIT CARD BILLING INFORMATION (Please Print):

Client / Clinic Name:			
Cardholder's Name: (as it appears on card)			
Credit Cards Accepted:	<input type="checkbox"/> VISA <input type="checkbox"/> MasterCard <input type="checkbox"/> Discover		
Credit Card Number:	-	-	-
Expiration Date:		CV2 (3 digit code on back):	
Billing Address:			
City:			
State:			
Zip / Postal Code:			
Country:			
Phone Number:			
Fax Number:			
Email:			

Card Holder's Signature: _____ Date: _____

Please note: Credit card information will be destroyed once the payment has been processed. TVMDL does not retain credit card data for Pre Pay customers. TVMDL recommends completing the New Client Form to become a client of TVMDL to avoid any delays in testing results.

Do not write below this line

FOR TVMDL USE ONLY

Accession #: _____

TVMDL Account #: _____

Estimated Charge: _____

Phone Payment Amount: _____

TVMDL Staff Member _____

CC Approval Code: _____

CC Processed Date: _____