

TYPE OF CREDIT/DEBIT CARD	
<input type="checkbox"/> American Express®	<input type="checkbox"/> Discover®
<input type="checkbox"/> Visa®	<input type="checkbox"/> JCB®
<input type="checkbox"/> MasterCard®	

CREDIT/DEBIT CARD NUMBER															
Do not leave any spaces between numbers															

EXPIRATION DATE			
Month		Year	

TOTAL ORDER AMOUNT
REINSTATEMENT FEE: US\$20
\$

To pay online by credit/debit card, complete this form, print it, and fax it to
1+610—290-8972

Add Value Added or similar taxes where applicable. Visit the TOEFL website for information about taxes.

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Date