



**ENGINEERING &
COMPUTER SCIENCE
ASSOCIATION
CONCORDIA UNIVERSITY**

Manual Card Payment Authorization

All Manual payments must be approved by an ECA Signing Officer before being processed.

Society: _____

Requested By: _____

Email: _____

Name (As it appears on the card) _____ Phone Number _____ Email _____

Credit Card # _____ Exp. Date (MM/YY) _____ CVV2 _____ Card type _____ Billing Address Postal Code _____

Item #	Item Description	Qty	Unit Cost	Total Cost	ECA Account
Total					

OFFICE USE ONLY

- All prices listed include taxes
- By signing this authorization agreement, the Purchaser authorizes ECA Concordia to charge their credit card above for the total amount specified above.
- This form does not constitute a purchase receipt. For an official invoice, please contact finance@ecaconcordia.ca.

Signature of Purchaser _____ Signature Date _____ Signature of ECA Signing Officer _____

OFFICE USE ONLY	Received by: _____	Date Received: _____	Processed by: _____	Date Processed: _____
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