Please Print

Ontario

Alcohol and Gaming
Commission of Ontario
90 Sheppard Avenue East, Suite 200
Toronto, Ontario M2N 0A4
1-800-522-2876 or 416-326-8700
Fax: 416-326-8711 (Gaming) 416-326-5555 (Liquor)

CREDIT CARD PAYMENT SLIP

Gaming File # _____

Liquor Licence # _____

Please include this slip with your liquor or gaming application

Establishment or Business Name: _____

Charge my Credit Card: ☐ VISA ☐ MASTERCARD ☐ AMERICAN EXPRESS **Amount of Payment $**_____
(Up to $5,000 Only)

Card # | | | | | | | | | | | | | | | |

Expiry Date | Month | | Year | |

Name of Card Holder _____ Tel. # (___) ___-____
First Name *Last Name*

Signature of Card Holder _____ Date: _____

I agree to pay above total amount according to card issuer agreement.

Note: For your security, we can only accept this original form for processsing the payment.

3080B (08/05)

Clear Form Entries