



# The Association of State and Provincial Psychology Boards

## Closed Records Verification Service (CRVS) Payment Form

\_\_\_\_\_  
Requestor Name

**Please check which transcript request you would like:**

- Standard Transcript Request (Processed within 5-10 business days) - \$10.00 **X** QTY: \_\_\_\_\_
- Expedited Request (Processed within 5 business days) - \$40.00 **X** QTY: \_\_\_\_\_

Cashier's check, personal check, money order, certified check, corporate business check or major credit cards are accepted for payment of application fees. Make checks payable to ASPPB. *All payments must be in U.S. funds and are **nonrefundable**.* Please attach method of payment or complete the credit card authorization for payment and return to ASPPB.

**Please indicate the type of payment you are submitting:**

Visa

MasterCard

AMEX

Discover

Check

Credit Card or Check No.	Total Amount Due:
Expiration Date:	Billing Address (for credit cards only)
Signature:	Date: