CE Credit Letter/Unofficial Transcript/Confirmation of Payment

Contact: Bonnie Dellatorre, CE Dept. **Email: Bdellatorre@scco.edu**
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Southern California College of Optometry
2575 Yorba Linda Blvd
Fullerton, CA 92831

Fee*: $25. Please send # _____ Copies

Type: ☐ **Credit letter** ☐ **Transcript** ☐ **Confirmation of payment**

Name_____

O.D. License #_____

Address_____

City_____State_____ Zip_____

Phone_____ Fax_____

Email_____

PAYMENT: ☐ Visa ☐ Master Card ☐ Check (payable to SCCO)

Card # _____Exp Date _____CVV_____

Name on Card_____

_____
Printed Name Signature Date

For an official transcript contact:

Lisa Cassidy – Student Affairs Office
Phone 714.992.7803
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E-Mail Address: lcassidy@scco.edu