

**Payment Confirmation**

Your one-time payment has been scheduled.
Please print a copy for your records.

Pay Invoice: 26442897

Date & Time Fri Jan 26 09:28:48 2018

Credit Card Information

Name on Credit Card	Kevin Kim
Address	5006 Lenker St. Suite #210
City, State, Zip	MECHANICSBURG, PA 17050
Credit Card Number	*****9658
Expiration Date	10/2019
Email Address	admin@studentslife.org
Invoice: 26442897	\$656.00
Payment Date	26-JAN-18
Invoice 1: 26442897	\$656.00
Total Amount to be Paid	\$656.00
Transaction Confirmation	20180126321860800
Credit Card Authorization Code	05432G

[PRINT CONFIRMATION](#)