



## Payment

\_\_\_\_\_ Check enclosed (payable to Maryland Works)

\_\_\_\_\_ Charge my: \_\_\_\_\_ Visa \_\_\_\_\_ MasterCard

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*Name as it appears on card*

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*Acct #*

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*CSC Code (3 digit code on back of Credit Card)*

*Exp date*

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*Signature*

*Please make checks Payable to **Maryland Works, Inc.** and return this form with payment to:*

*Maryland Works, Inc.  
10270 Old Columbia Road  
Columbia, MD 21046-1854*

