Eastern Illinois University

PURCHASING CARD FAX COVER SHEET



For Business Use Only with the Eastern Illinois University Purchasing Card Program

Unauthorized billing using this credit card number is prohibited. Vendors that do not

accept cree	dit cards	shou	uld no	tify the o	contact p	erson below prior to	o pr	ocessing order.	
For Questions about this Order, Please Contact:			Date	:					
Contact Phone Number:			Page	Pages, Including Cover:					
Contact Fax Number:									
<u>VENDOR INFORMATION</u>									
Name:					Cont	act Name:			
Address:					Cont	act Phone Number:			
					Cont	act Fax Number:			
City, State, & Zip:					I				
SHIPMENT MUST INCLUDE 1. Detailed Receipt, including vendor information, amount (itemized), and date of transaction									
2. Packing SHIP TO INFO Please indicate I Purchase Order	ORMATION CONTROL OF CO		hipping	label, pac	king slip,	or receipt in place of wl	here	you would normally put	t a
Deliver To Name:									
Deliver To Department Na	me:								
Building Name & Room Number									
		Eastern Illinois University Central Receiving University Drive & Hayes Street Charleston, IL 61920							
PAYMENT INFORMATION									
MasterCard Number:						Expiration Date:			Ī
Name Embossed on Card:		d:				Tax Exempt Number	r:	E9988-4781-05	ı

Signature:_ Date:_