

AUTHORIZATON TO INVOICE

Loyola University Maryland requires sponsorship confirmation every term before sponsors are invoiced for courses. Complete the form in detail confirming the student's entitlement under your sponsorship. The sponsoring organization authorizes Loyola University Maryland to invoice accordingly.

Student Name _____	Student ID _____
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(Please Print: First/Middle/Last-2.4 (d)-17)

_____	_____	Limited
_____	_____	
_____	_____	

Tuition		\$
Program Fee		\$
Registration Fee		\$
Books		\$
Supplies		\$
Total		\$

Please list all class authorized for sponsorship.

Initial (full sponsorship) or record an amount (limited sponsorship) for each category. If not applicable leave blank.

Sponsoring Organization _____ Sponsor ID _____

Authorized Officer Signature _____

Printed Name _____ Position Title _____

Phone No. _____ Fax No. _____ Email _____

Fax, Mail or Email Completed Form to: Loyola University Maryland Attention: ^ ^ 4501 N. Charles Street Baltimore, Md 21210 Fax No 410.617.5100 Email: • •@loyola.edu	SPONSOR BILLING ADDRESS (to be stamped)
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