

# 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		\$
<b>Total</b>		<b>\$</b>

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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