



# Departmental Billing Claim Form

**Office of Telecommunications**  
**The Tech Center, 3<sup>rd</sup> floor (286-99)**  
**Fax: 1-6856**  
**Questions? Contact us at 1-8655**

To report the change of a FOAPAL for billing purposes or to submit a service billing inquiry, please provide the information below. Upon completing the form, please fax or mail it to:

**Office of Telecommunications**  
**1101 W. Montgomery Avenue**  
**The Tech Center, 3<sup>rd</sup> floor (286-99)**  
**Fax: 1-6856**

Attach additional pages if more space is needed. For billing assignment inquiries, it is asked that the requesting department make an initial attempt to identify the user of the extension. Please contact us at 1-3371 with any questions.

REQUESTING DEPARTMENT INFORMATION	
Date of Request:	FOAPAL:
Contact:	Department:
Extension:	Budget Unit Head Signature:
Fax:	E-mail:

\* Please note - Your request *will not be processed* if the information above is not provided\*

COST CENTER CHANGE REQUEST				
<u>EXT.</u>	<u>ENET</u>	<u>Old FOAPAL</u>	<u>New FOAPAL</u>	<u>Reason for Change</u>

\*\*Please Note: When reassigning all (Voice/ENET) services, simply enter "All Services" in the Ext/ENET column\*\*

BILLING INQUIRY			
<u>EXT.</u>	<u>ENET</u>	<u>FOAPAL</u>	<u>Reason for Inquiry</u>