

CALLING CARD
REQUEST FORM

Communications and Network Systems

I request that an official University of Kentucky calling card(s) be issued to:

_____ Charge to: _____
Name Acct# Dept. # Phone #

_____ Charge to: _____
Name Acct# Dept. # Phone #

_____ Charge to: _____
Name Acct# Dept. # Phone #

_____ Charge to: _____
Name Acct# Dept. # Phone #

_____ Charge to: _____
Name Acct# Dept. # Phone #

_____ Charge to: _____
Name Acct# Dept. # Phone #

Department Requesting Card(s) _____

Dept.# Address Speed Sort

This card is issued for the following reasons: _____

This card is to be used for official business calls and must be returned when no longer required by the department or individual. This card will be cancelled if misused.

Authorized by : _____
Date : _____

MAIL OR FAX COMPLETED FORM TO:

Phil Maggard
Communications Services
04 Parking Structure #2
Lexington, Ky. 40506-0198
Phone: : 323-7000 x80311
Fax: 323-9000