



UNC CHARLOTTE

Request to Increase Copy Card Value

We cannot process this form electronically. Please read terms and conditions for use of cards. Once this form is filled out, obtain an authorization signature, and mail or fax (704-687-3666) the form to the Copier Office. Do not send cards.

Department Name: _____

Account Number: _____ -928170

Contact Name: _____

Phone Number: (____) _____ - _____

1. List the number on the front of the card.
2. When requesting a new card, check NEW next to the card number box.
(There is no charge for new Administrative Copy Cards.)
3. Fill in the # of copies/prints you want to add to each card.

Administrative Copy Cards can be used for copies and prints.

Card Number: _____ Amount: \$ _____ NEW

Card Number: _____ Amount: \$ _____ NEW

Card Number: _____ Amount: \$ _____ NEW

Special Instructions: _____

Authorization Signature: _____ Date: ____/____/09

This is not an invoice. This information will be used to generate an invoice that will be sent to Accounts Payable for billing purposes. A copy of the invoice will be emailed to you.

Office Use Only

\$ _____ Added to Card

Invoice # _____

Phone: 704-687-7333

Fax: 704-687-3666

