



Mail to:

Room 1217
McKeldin Library
College Park, MD 20742

Phone: (301) 405-9057
Fax: (301) 314-8674
E-mail: mw106@umail.umd.edu

Please fill out form completely

Dept Name: _____

Phone: _____

Billing Address: _____

Credit Card: [] [] Visa [] [] American Express [] [] Mastercard [] [] Discover

Credit Card No.: _____ Exp.Date: _____

Credit Card No.: _____ Exp.Date: _____
For verification purposes

FRS Account: _____
Please use the FRS Account associated with the above credit card no. FRS Account no.'s beginning with 5 will not be accepted

Cardholder's Name: _____

Authorization Signature: _____

Signature of Recipient: _____

Copy Card Information:

Table with 3 columns: New Card, Existing Card No., Amount added (max \$100.00). Includes a Total row at the bottom.

Please note:

There is a 30% discount on any value added to departmental copy cards.

There is an initial \$2.00 charge for each new copy card issued