

Saint Mary's College Telecommunications Move, Add or Change Request

Date _____ **MAC #** _____

Department _____ Contact _____ Extension _____

Department Head Approval _____ Budget Acct # _____

Vice President Approval _____ Date _____

Work to be done:

Extension _____ Location: Bldg _____ Room _____

Install New Extension(s): Single Line _____ Multi-line Phone _____

Type of Service: Campus _____ Campus, Local & Toll-free _____ Long Distance _____

Name on Display _____ Name on Bill _____

Notes/Justification: _____

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For Office Use Only:

Date Processed _____ AT&T Ticket No. _____

Date Work Scheduled _____ Billing Received _____

Cost of Labor, Materials _____ Additional Charges _____

Month/Year Billed to Department _____ Processed by _____