

Education Sponsor's Intent To Pay

	aacaci		<u> </u>	
Date		P.O. #		Vendor
		Sponsor Name/Billi	ng Information	
Organization				
Attention				
Address				
Address				
City, State, ZIP				
Tel:				
Email				
Student			Stuc	dent ID #
Semester	Course Descrip	tion		Price
Additional Inst	ructions/Require	ments:		
Authorized Signature			Data	