UNIVERSITY OF MARYLAND, COLLEGE PARK,

7093 Preinkert Drive, Bldg 26 South Campus College Park, Maryland 20742 301-314-8068 Attention: Dining Plan Office

301-314-8068

diningplan@umd.edu



DEPARTMENT OF DINING SERVICES INVOICE

INVOICE NUMBER $_$	
INVOICE DATE	

DINING HALL CARD REQUEST FORM

	Off Campus (Pi	rePaid)		
Originator				
Address				
Phone	Business Contact			
☐ Check ☐ Credit (Card Date/	_/		
	Card Request Inf	ormation		
Meal Date(s) Beginning	E	Ending		
		Number of Meals on Each Card	#	
	MEAL CARE	Number of Cards Requested	#	
			9.50	
		Total Charge	\$	
Special Notes				
No de a Contro Describerto	D. c. i al D	D. I.		
Number of Cards Received #	,		//	
Additional Cards Received #	Received By	Date	//	
Number of Returned Cards #	Received From	Date	/	
DIRECT ALL INQUIRIES TO: Dining Plan Office	MAKE ALL CHECKS PAYABLE TO: University of Maryland		Mail to: University of Maryland	

7093 Preinkert Drive Bldg 26 South Campus College Park, MD 20742

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