

Recharge Request for Campus Provided Goods, Services, or Entertainment

Form Ref No. _____

Request Date:

Unit Providing Service/Goods: TAPS Contact Name: TAPS Sales Office Phone: 9-4543 Email: tapssales@ucsc.edu

Unit Requesting Service/Goods: _____ Requestor Name: _____ Phone: _____ Email: _____

<p>Description of Goods and/or services</p> <p>Specify permit type and quantity: _____ Full day Permit (\$10) _____ 4 Hour Permit (\$5) _____ Official Use (\$990)</p> <p><small>**The maximum order quantity is 50 permits. **Please note these guest permits are not to be used by staff, faculty, or students</small></p>	<p>Delivery option:</p> <p><input type="checkbox"/> Send permits to Kiosk for individual guest to pick up <input type="checkbox"/> Requestor will pick up permits at Sales Office (photo ID required) <input type="checkbox"/> Another person will pick up permits at Sales Office (photo ID required) - Name: <input type="checkbox"/> Mail to campus mail stop** - Please specify:</p> <p><small>**Please note that by selecting Campus Mail, you are acknowledging that TAPS is not responsible for any items lost or stolen. Permits lost in the mail cannot be refunded or replaced.</small></p>
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Any special instructions for guests (specify pick-up date):

Required FOPAL Information:

Index	Fund	Org.	Account	Activity	Debit 'D'	Credit 'C'	Description	Doc Ref

Authorization for Charge (Debit)

Authorization for Credit

Submit this recharge form to: tapssales@ucsc.edu