

CORNELL UNIVERSITY – ILR School Extension and Outreach

Assess-A-Fee Form For Non-Course Related Billing

Please submit the information below to ilrcustomerservice@cornell.edu

Name of Program/Service _____

Prepared by _____ Date Prepared _____

Account Number _____

Bill the following Organization

Company/Union Name	
# & Street	
City, State, Zip	
Contact Person	
Contact Area Code and Phone	

Description of Charges

Program/Services Provided	
Program/Service Location	
Program/Service Date(s)	

Total Amount to be Billed

Program fee(s)	
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Special Billing Instructions/Breakdown of Fees/Billing Schedule

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Document Attached

Purchase Order Number _____ Non-Credit Registration