



**ENGINEERING &
COMPUTER SCIENCE
ASSOCIATION
CONCORDIA UNIVERSITY**

Request for Invoice

Society _____

Company _____

Phone _____

Email _____

Requested By _____

Company Address _____

Company Contact _____

Item #	Budget Line	Item Description	Qty	Unit Cost	Total Cost	ECA Account
			Total			

OFFICE USE ONLY

OFFICE USE ONLY

INVOICE			
Received by:	Date Received:	Processed by:	Date Processed:
PAYMENT			
Received by:	Date Received:	Processed by:	Date Processed: