

Bill copy to: _____ Mail Code _____ Authorized Signature _____	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr><td style="text-align: center;">INDEX NUMBER</td></tr> <tr><td style="height: 30px;"> </td></tr> </table>	INDEX NUMBER								
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Please enter information below as you want it to appear on the business card.

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State: _____ Zip: _____

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Cell Phone: () _____

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Department URL: _____

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<h2 style="margin: 0;">UC San Diego</h2>	
<p>Name</p> <p>Title</p> <p>Department</p> <p>Department</p> <p>Department</p> <p>University of California San Diego</p> <p>9500 Gilman Drive # 0000</p> <p>La Jolla, CA 92093-0000</p>	<p>Tel: (000) 000-0000</p> <p>Fax: (000) 000-0000</p> <p>Cell: (000) 000-0000</p> <p>email@ucsd.edu</p> <p>url.ucsd.edu</p>

Additional Information: