EXTERNAL BILLING SUMMARY

SOUTHERN ILLINOIS UNIVERSITY

| Date: | | | | | | |
|-----------------------------------|----------------------|-------------------------|-------------------------|---------------|--------|--|
| From: | | | | | | |
| | Account Title of Dep | partment Billing Ot | her University Acc | ounts | | |
| Charges for the Period From: | | _ | | | | |
| CHARGES TO OUTSIDE VENDORS | Vendor Nar | | | | | |
| | Amount | | | | | |
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| | | | | | Total | |
| | | | | | Total | |
| CHARGES TO EDWARDSVILLE CAMPUS | | | | | Total | |
| | | | | | Total | |
| | TOTAL CH | ARGES TO EDW | ARDSVILLE AND | OUTSIDE VENDO | RS | |
| REVENUE SECTION | | | | | | |
| Account Title | Budget Purpose | Dept Activity Code 1 | Dept Activity Code 2 | Revenue Code | Amount | |
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| FISCAL OFFICER/DELEGATE SIGNATURE | | | | | | |

EXTERNAL BILLING SUMMARY

SOUTHERN ILLINOIS UNIVERSITY

| From: Account Title of Department Billing Other University Accounts | | | | | | | | | |
|--|----------------|-------------------------|-------------------------|-----------------|--------|--|--|--|--|
| Charges for the Period From: | | FY _ | | | | | | | |
| CHARGES TO EDWARDSVILLE ACCOUNT - STATE ONLY | | | | | | | | | |
| Account Title | Budget Purpose | Dept Activity Code 1 | Dept Activity Code 2 | Exp Object Code | Amount | | | | |
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| | , | | TOTAL S | TATE CHARGES | | | | | |

EXTERNAL BILLING SUMMARY

SOUTHERN ILLINOIS UNIVERSITY

| From: | Account Title of Dep | oortmont Billing Ot | har University Ass | ounto. | | | | |
|--|----------------------|-------------------------|-------------------------|-----------------|--------|--|--|--|
| <i>'</i> | Account Title of Dep | Dartifierit Billing Oti | ner University Acc | Journs | | | | |
| Charges for the Period From: | | | | | | | | |
| CHARGES TO EDWARDSVILLE ACCOUNT - LOCAL ONLY | | | | | | | | |
| Account Title | Budget Purpose | Dept Activity Code 1 | Dept Activity Code 2 | Exp Object Code | Amount | | | |
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| | | | TOTAL LO | OCAL CHARGES | | | | |