

Budget # ___ - ___ - ___ - _____ - _____ Quantity: ___ 100 ___ 250 ___ 500 ___ 1000

By providing a budget number, you are acknowledging that you have received approval authorizing this expense.

Please complete and return this form (email or print) to the office below and **include a sample or photocopy of your most recent business card if available.**

Office of Marketing and Communication

Stacy Popp, Marketing and Communication Coordinator
45 Heffron Hall, Campus Box 36, Winona Campus
507-457-1497 ■ spopp@smumn.edu

 <p>Saint Mary's University OF MINNESOTA</p> <p>SMUMN.EDU</p>	<p>Campus Street Address, # xx City, State, ZIP</p> <p>Toll free xxx-xxx-xxxx Ext. xxxx Office xxx-xxx-xxxx Mobile xxx-xxx-xxxx (optional) Fax xxx-xxx-xxxx (optional) email@smumn.edu</p>
<p>Name Title, Department</p>	

Sample 1: One Campus

 <p>Saint Mary's University OF MINNESOTA</p> <p>SMUMN.EDU</p>	<p>Winona Campus Street Address, # xx City, State, ZIP</p> <p>Twin Cities Campus Street Address City, State, ZIP</p> <p>Toll free xxx-xxx-xxxx Ext. xxxx Office xxx-xxx-xxxx Mobile xxx-xxx-xxxx (optional) Fax xxx-xxx-xxxx (optional) email@smumn.edu</p>
<p>Name Title, Department</p>	

Sample 2: Two Campuses

Attach sample of most recent business card if available

Name: _____

Official Title(s): _____

Department: _____

Campus: _____

Street Address: _____

Campus Box # (Winona Campus only): _____

City, State, ZIP: _____

Toll Free: _____ Ext. _____

Office Phone: _____

Mobile Phone (optional): _____

Fax (optional): _____

Email Address: _____

Additional information:

Date Needed: _____

Please indicate if you will be ordering a two-sided card (additional charges apply): ___ Yes ___ No