



RECHARGE ORDER REQUEST

										SVC UNIT 1	DEPT. CODE 2	REQUISITION NUMBER 3	P/F 4
RCHG ID 5	LOC 6 4	ACCOUNT 7	CC 8	FUND 9	PROJECT 10	SUB 11	OBJECT 12	SOURCE 13	CHARGE AMOUNT 14	MEMO-LIEN AMOUNT 15			

TO ¹⁶ Dashew Center - SEVIS User and J-2 Dependent Fees	FROM ¹⁷ (Department)	DATE ¹⁸
PREPARED BY ¹⁹	TELEPHONE	APPROVAL SIGNATURE ²⁰ TELEPHONE

SEND BILL TO ²¹ (Department and Mail Code)	DELIVER TO ²¹	RECEIVED BY ²³
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24 QUANTITY	25 ARTICLE OR SERVICE	26 UNIT PRICE	27 AMOUNT
	Scholar Last Name: Scholar First Name: Program Dates: Start End J-2 Dependent Fee: - Fee is \$40 per dependent (spouse or child) x year of appointment. - For example, the fee for 2 dependents on a 2-year program will be \$160. For more information: DCISS J-2 Dependent DS-2019 Processing Fees	\$40 per year X years = \$ of appointment + Dependent Fee = \$ TOTAL \$	