

**Date Requested:**

**NIH Telecommunications Billing Inquiry**

**[http://www.cit.nih.gov/dnst/DNSTweb/Telecom\\_Billing/index.htm](http://www.cit.nih.gov/dnst/DNSTweb/Telecom_Billing/index.htm)**

Your complete IC name:

Contact name:

Contact phone number:

Building and room number:

Related BAC(s):

Related CAN(s):

Describe your request:

To submit form to Telecommunications Billing Office [click here](#)