

We have a new invoice format. To ensure proper payment posting, please reference the **MDA-ID** and **Invoice number** as shown below, include the yellow invoice copy, also enclosed, with your payment. Should you have any questions please contact Loretta Davis, Program Coordinator at (713)745-8999 or by email at RDS@MDAnderson.org, please be sure to note your invoice and customer account number in the subject line. Thank you in advance for your assistance in processing your payment in a timely manner.

Remit to Options: For credit card payments, please contact our office for further instructions (or click [here](#) from website for credit card payment form).

Check or Money Order

The University of Texas
 M. D. Anderson Cancer Center
 P. O. Box 4390
 Houston, TX 77210-4390

 Our tax ID# is 74-600-1118

ACH/EFT

JP Morgan Chase Bank, N.A.
 ABA Routing No: 111000614
 Account Name: Univ. of Texas M.D. Anderson Cancer Ctr.
 Account Number: 1586838979

Wire Transfer (bank fees are not included on invoice, customer is responsible for bank fees)

JPMorgan Chase Bank, N.A.
 International Banks - SWIFT: CHASUS33
 Domestic Banks - ABA ROUTING NO: 021000021
 ACCOUNT NAME: University of Texas MD Anderson Cancer Center
 ACCOUNT NO: 1586838979

SAMPLE INVOICE:

The University of Texas M.D. Anderson Cancer Center
 Radiation Dosimetry Services
I N V O I C E

Date: 3/23/2017

TO: Your Institution
 Billing Address
 City, State, Zip Code

Please reference:
 MDA-ID: #####
 Invoice #: MDA00#####
 PO-number: Your PO info

FOR: ##### - Institution Name - City, State
 Physicist Name
 Physicist Phone #
 Physicist Email

Date	Material or Services Rendered	Unit Price
3/1/2017	TLD for 06 MeV - #G###	\$140.00
3/1/2017	TLD for 09 MeV - #H###	\$140.00
3/1/2017	TLD for 16 MeV - #E###	\$140.00
3/1/2017	TLD for 06 MV - #6###	\$100.00
3/1/2017	TLD for 06 MV - #6###	\$100.00
3/1/2017	TLD for 10 MV - #7###	\$100.00
3/1/2017	TLD for 10 MV - #7###	\$100.00
3/1/2017	TLD for 15 MV - #8###	\$100.00
Amount Due:		\$920.00

SAMPLE ONLY