



EDC Educational Services

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Literacy for a Lifetime Grant Information Form

Organization Information

Organization: _____
Address: _____
Contact: _____ E-mail: _____
Phone: _____ Fax: _____
Tax Exempt ID # _____

Grant Information

Issuing Organization: _____
Grant ID # _____
Contact: _____ Phone: _____

Payment Information

CHECK - Make checks payable to: Literacy for a Lifetime/EDC

CREDIT CARD - Discover MasterCard Visa

Name on Card: _____

Card #: _____ Exp: _____ CSV(3 digits) _____

Signature: _____ ZIP: _____

PURCHASE ORDER - Purchase Order Number: _____

Bill to Information Organization: _____

Address: _____

Please contact Kathy Hughes 1-877-875-1626 with any questions.