



ELECTRONIC FUNDS TRANSFER RETURN REQUEST

Student Financial Services
CASS Building
1735 Wahnish Way
Suite 103
Tallahassee, Florida 32307

Phone: 850-561-2949 - Fax: 850-599-8618 - Email: studentaccountsdocs@famuedu

Print Full Name: (Last), (First) Student ID:

Student Address: (Street Address) (Apt #) (City) (State) (Zip Code)

Phone Number: Email Address:

PLEASE ANSWER THE FOLLOWING QUESTION BELOW BEFORE COMPLETING THIS REQUEST:

IS YOUR DIRECT DEPOSIT INFORMATION OR MAILING ADDRESS CURRENT? YES NO

PLEASE NOTE: If you have a balance on your account, the proceeds from the electronic funds transfer will be applied to the balance in iRattler. Please allow up to 14 business days for processing week.

EXPLANATION:

STUDENT'S SIGNATURE DATE

Request: Approved Denied

AMOUNT: \$

AMOUNT: \$

COMMENTS:

ASSISTANT CONTROLLER'S SIGNATURE DATE

OFFICE USE ONLY>>EFT REVERSED FROM IRATTLER/REFUND PROCESSED IRATTLER<<

DATE: EFT/CHECK# SIGNATURE:

RECEIVED BY: RETURNED DATE: UPDATED: REVERSED: AMOUNT REFUNDED: \$