



CAT CASH CANCELLATION FORM

1. CONTACT INFORMATION

Name (Last, First, M): _____ University ID: _____

Address: _____ Room/Apt: _____

Email: _____ Phone: _____

Current Status: Undergraduate Graduate Student Faculty/Staff Other

2. CAT CASH CONTRACT ACTION REQUESTED

CANCEL my Cat Cash Auto-Refill. By canceling the auto-refill feature, I understand that I will need to manually add funds to my account in the future.
Initials: _____

CANCEL my Cat Cash Debit Account Plan and REFUND any remaining balance over \$26 to my Student Account.

3. POLICY INFORMATION

- I understand that Cat Cash does not expire as long as I am enrolled in or employed by the University. Initials: _____
- I understand that by requesting a refund, any remaining balance will incur a \$25 administrative fee. This fee will be deducted from my remaining balance of funds. Initials: _____
- I understand that all funds below \$26 will be forfeited to the University and no refund will be processed. Initials: _____
- I understand that refunds may take up to two weeks to appear back in my Student Account. Initials: _____

4. SIGNATURE

I have read, understand and agree to the terms and policies of cancelling my Cat Cash Account and still wish to cancel.

Signature: _____ Date: _____

THIS SECTION IS FOR UNIVERSITY FOOD SERVICE DEPARTMENT USE ONLY.

	Before Change	Amount Deleted	After Change	CBORD
# Cat Cash				CBORD DATE:
				RMS:
				RMS DATE: