

# MARIST

## CREDIT CARD REFUND FOR MARIST MONEY DEPOSIT ERRORS

### Student Information:

Student Name: \_\_\_\_\_ Student Id #: \_\_\_\_\_ Date: \_\_\_\_\_  
(Please print)

### Account to be refunded:

Marist Money Account

Justification of refund: \_\_\_\_\_  
\_\_\_\_\_

### Credit Card Information:

Card Holder Full Name: \_\_\_\_\_ Deposit Date: \_\_\_\_\_

Visa     MasterCard     Discover    Deposit Amount: \_\_\_\_\_

Credit Card Number: \_\_\_\_\_ XXXX-XXXX \_\_\_\_\_ Expiration Date (MM/YY): \_\_\_\_/\_\_\_\_  
                            First four digits                      Last four digits

### Signature (required):

\_\_\_\_\_  
(Print)

\_\_\_\_\_  
(Signature)

I authorize Marist Card Services to refund my account using the credit card information I have given. I verify that the information is current and accurate.

### For Office Use Only

TransRoute Id \_\_\_\_\_ TransRoute Refund Id \_\_\_\_\_

Documentation prepared by \_\_\_\_\_

Documentation provided:  Student History Report     Transaction Summary Report     CC number

Processed by \_\_\_\_\_ Date Processed \_\_\_\_\_

Transaction processed in OneCard  Adjust balance     Refund balance     Reverse transaction

Cleared to: \_\_\_\_\_ Refunded to: \_\_\_\_\_

Note \_\_\_\_\_

HCS Director Approval \_\_\_\_\_

**OFFICE OF MARIST CARD SERVICES**  
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