GEORGE MASON UNIVERSITY

Send to: Accounts Payable
MSN: 3C1
Tel: (703) 993-2580

Revenue Refund

Optional Tracking Number RR _____

Invoice Number (internal use only)

This form is used to return money previously collected from individuals or organizations. Revenue refunds can be processed only as offsets to revenue account codes. The fund or org and revenue account code must be the same as those used in recording the initial deposit.

Make Check Payable To:

Name: _____

Address: _____

_____

_____

_____

_____

FIN: _____

(University employee or student enter G number)

Date Submitted: _____ Date Required: _____

Requesting Department/Organization:

Dept. Name: _____

Contact Person: _____

MSN: _____ Tel: _____

Charge to: _____

Fund or Org	Account	
_ _ _ _ _ _	_ _ _ _ _ _	$
_ _ _ _ _ _	_ _ _ _ _ _	$
_ _ _ _ _ _	_ _ _ _ _ _	$

Description	Amount
Provide a brief explanation of the revenue refund request. Cite the policy that authorizes this refund, if applicable.	

Supporting Documentation (If supporting documentation is not available, explain in "Description" section.)

- ☐ Copy of the original, validated cash receipt attached.
- ☐ Printout of Banner Self Service query or Standard Report confirming original deposit attached.
- ☐ Other (specify): _____

Approval: I certify that this revenue refund is appropriate for payment and has not been previously paid.

1. Signature of person initiating revenue refund	Print name	Title	Date

2. Signature of approving official for fund or org	Print name	Title	Date

Distribution: Send original and supporting documentation to Accounts Payable; keep a copy for department records.

Mar 2008