

NONAPPROPRIATED FUND REFUND REQUEST

Data required by the Privacy Act

AUTHORITY: Title 5, USC Sec 552a

PRINCIPAL PURPOSES: To request refund of monies paid for activity/program/merchandise/services, which is authorized for emergencies or exigencies beyond the control of the individual. Information requested is required to identify individual requesting refund; to contact individual if additional information is required; and to mail refund.

DISCLOSURE: Information is voluntary. However, failure to disclose required information may result in delay of processing and mailing refund.

REQUESTOR (Payee)

Print full name: _____

Last 4-digits SSN: _____

Mailing Address: _____

Work Phone: _____

Home Phone: _____

Signature: _____

Date: _____

REASON FOR REFUND

- Damaged/Unsatisfactory Merchandise
- Cancellation of Event/Program
- Lost money in vending/amusement machine
- Other: _____

- CYS Only:**
 Period: _____ No. of children: _____
 Service used: _____
 Amount paid: _____
 Charges: _____ Refund: _____

LTS Only:

- On receiving report Not on receiving report

Service vendor: _____ Coordination: _____

Organization/Activity: USAG-HI, DFMWR, CRD, LTS Cashier: _____

Amount of refund: _____

Location Code: _____ GLAC: _____ Department Code: _____

Method of refund: NFS check Cash drawer Petty cash Credit

Attach: **Copy of receipt # :** _____ Other: _____

Recommend: Approval Disapproval (if disapproved, give reason):

Activity Manager/Supervisor (print or type): _____

Signature: _____ Date: _____

Approved Disapproved: _____

Branch/Division Chief (print or type): _____

Signature: _____ Date: _____