

MCG EXPRESS CARD

Request to

CLOSE ACCOUNT

MCG Express Card account balances are carried forward until a student either graduates, is dismissed, or withdraws from school, or an employee resigns, retires, is terminated, or formally closes the account. Any unused/unclaimed funds less than \$25 become the property of the MCG Express Card office. Refunds of \$25 or more are made only by credit card refund or by mailed check after the customer's request is received in writing at the MCG Express Card office. Refunds are mailed to the address provided at the time refund is requested.

TO WHOM IT MAY CONCERN:

Please close the **MCG Express Card** personal funds account for: STUDENT EMPLOYEE OTHER

Name

SSN-Last four only MCG Time & Attendance # Student Pulse ID #
(5 digits only)

Please mail remaining account balance

Please credit bank card

REASON:

GRADUATION WITHDRAWAL LEAVE OF ABSENCE TERMINATION

RETIREMENT OTHER: _____

Please mail remaining account balance to:

Name

Address

City State Zip Phone

Patron Signature Date

Mail or bring this form to: MCG EXPRESS CARD Office
Medical College of Georgia
Student Center DA-106B
Augusta, GA 30912
(706) 721-9939

OFFICE

Balance to return: _____ (attach Rpt #201)

Verified and closed by: _____
Date