

**AUTHORIZATION TO TRANSFER FUNDS
TRANSFER FROM STUDENT ACCOUNT TO CAMEL CARD**

DATE: _____

STUDENT REQUEST:

STUDENT ID#: _____

STUDENT NAME: _____

- I request the amount of \$_____ to be transferred from my Campbell University student account to **my** Campbell University Camel Card.

Student's Signature: _____

Student Contact Information: Email _____

Phone _____

Form must be forwarded to the Business Office for processing! You may hand-deliver to the Business Office or:

Email to: businessoffice@campbell.edu

Fax to: 910-893-7863

STUDENT ACCOUNTS PROCESSING: (Business Office Section)

Date Processed: _____

Colleague Invoice#: _____ Processed by: _____

BLACKBOARD PROCESSING: (Business Office Section)

Cashier: _____ Date: _____
