

Funds Lost at Laundry Facility

Student Name _____

Student ID # _____

Phone # _____

Location of Laundry _____

Number of Wash/Dry Cycles Not Credited _____ Wash Cycles _____ Dry Cycles
Date of Use _____

By signing below, I verify use of the laundry facilities at the location noted above and I was not allowed to wash/dry for the number of cycles indicated even with proper funds on my ABAC Gold Card. I understand the use of my ABAC Gold Card at the machine will be verified prior to the funds being returned to my card.

Signature

Date

For Gold Card Use Only:

Funds Verified on _____

Action Taken _____

Process By _____