

Modified Payment To Student Account

## Business & Financial Services

 **Accounts Receivable Operations**

 **6024 Campus Delivery**

 **Fort Collins, CO 80523-6024**

Student’s Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ CSUID \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

KUALI Account Number\* KUALI Sub-Account

KUALI Object Code\* KUALI Sub-Object Code

Payment Amount\*

\*Required fields

PLEASE PROVIDE THE FOLLOWING:

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Authorized Person (print) Signature Dept Name

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_

Phone # Date Semester

### Reason/Description for Payment \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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Please note that Graduate Assistant Payments, Discretionary Scholarships, and Sponsor Designated Scholarships or Fellowships (53 and 99 funds) must be paid on a DPSA form.

###  Return this form to Janet Fox, Accounts Receivable Operations, 6024 Campus Delivery

For Office Use Only

**Financial Aid Accounts Receivable**

🞎 **Reviewed** 🞎 **Processed**

**\_\_\_\_\_\_ \_\_\_\_\_\_ \_\_\_\_\_\_\_ \_\_\_\_\_\_**

**Initial Date Initial Date**