

Shasta County Office of Education

Credit Card Refund Request

1. Complete the **Credit Card Refund Request Form**
 - a. Requesting Program – Enter the name of the SCOE program/department requesting credit card refund
 - b. Program Contact – Enter the name of the person Business Services should contact with questions regarding requested refund
 - c. Phone Number – Enter the telephone number for contact person indicated
 - d. Card Holders Name – Enter the card holders name
 - e. Date of Sale – Enter the date of the sale
 - f. Amount of Sale – Enter the amount of the original sale
 - g. Amount of Refund – Enter the amount to be refunded
 - h. SKU Number – Enter the SKU Number
 - i. Reason for Refund – Enter the reason for the requested refund
2. Obtain program manager approval signature
3. Forward to Business Services for processing

Please contact Business Services should you require assistance or have questions regarding the credit card refund process.