

University of Washington U-Pass Charge Petition

Return to: **Student Fiscal Services**
129 Schmitz Hall
Box 355870
Seattle, WA 98195-5870
206-543-4694 fax: 206-685-2942
e-mail: sfshelp@u.washington.edu

QTR _____

YEAR _____

Student # _____ UW e-mail _____

Name _____

Last

First

MI

Address _____

Street

City

State

Zip Code

FOR OFFICE USE ONLY

Granted

Advised Student

Verbal

E-mail

Adj Balance

Denied

Advised Student

Verbal

E-mail

Done by: _____

Date: _____

Last Name:

First:

Initial:

State reason you believe charge should be cancelled:

Date: _____ **Signature:** _____