

Advance Returns

MISREC

Date: _____

Cashier's Office * Hinman Box 6132 * 646-2433 * DARTMOUTH COLLEGE * HANOVER * NEW HAMPSHIRE * 03755

This form is necessary if you are returning unused funds with a check payable to: "Trustees of Dartmouth College" To return unused advance funds via debit or credit card go to Returning Funds to Dartmouth College at: https://www.dartmouth.edu/finance/tuition/other_payments/return_funds.php

Print Name:	
Name on Advance: Phone Number:	Net ID:

OnBase Number (begins with OBCA)	Amount Returning

Signature: _____

** I acknowledge receipt of amount shown as received.**

Cashier's Initials:	Date:
Entity: Org: Natural Class:	