



PACER Service Center (PSC)
P.O. Box 780549
San Antonio, TX 78278

REFUND FORM

Phone Number: (800) 676-6856, Fax Number (210) 301-6441, Email pacer@psc.uscourts.gov

Complete this form and submit it along with a letter of request to receive a refund for payments made to the PACER Service Center. You may forward your documentation by fax or mail to the address listed above. Please allow 4-6 weeks for payment processing. In most cases refunds will be issued via electronic funds transfer or back to the credit card used originally. The refund will appear as a credit to your checking or savings account or your credit card statement. If you do not have a bank account, a check will be mailed to the address below. Complete Section I and IV for refund by credit card. Complete Section II and IV for refund by electronic check. Complete Section III and IV for refund by check. **Please type or print clearly.**

Login ID: _____ Firm Name: _____
POC: _____

Section I Refund **credit card** previously used (check box and proceed to Section IV)

Section II **Payment Information** (Payment will be made by **Electronic Funds Transfer**)

Payee:	Financial Institution:
Name: _____	Name of bank: _____
Address: _____	City of bank: _____ State of bank: _____
	Zip of bank: _____
City: _____ State: _____	Routing Number: _____
Zip: _____	Account Number: _____
Social Sec Num/Tax ID: _____	Type of Acct: Checking: _____ Savings: _____

Section III If payee does not have a checking or savings account please check the box below.
I certify that I do not have a checking or savings account. I am requesting a **check payment**.

Section IV

_____ Telephone number	_____ Printed name of payee
_____ Date	_____ Signature of payee

Fax this form to: (210) 301-6441	OR	Mail to: PACER Service Center PACER Registration P.O. Box 780549 San Antonio, TX 78278-0549
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