



Refund Request Worksheet

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Accounting code: 3XPQPQ0024PQPSCRTPUBLICUSDA/0203

Date:

Note: Please attach any documentation that supports the refund

Company Information

Company or individual name:

PCIT Org ID number:

Phone number:

Contact person:

Contact email:

Address:

Reason for refund:

Payment type used to fund PCIT

(Complete only the appropriate payment type below)

1. Physical check *

Financial institution name:

Financial institution routing number (RTN):

Tax Identification Number (TIN):

Depositor account title:

Depositor account number:

Refund amount:

Accounting code: 3XPQPQ0024PQPSCRTPUBLICUSDA/0203

Check number:

2. Electronic check (ACH) *

Financial institution name:

Financial institution routing number (RTN):

Tax Identification Number (TIN):

Depositor account title:

Depositor account number:

Refund amount:

Pay.gov Tracking ID:

3. Credit card †

Name on card:

Amount of original charges:

Amount of refund:

Agency tracking ID:

Pay.gov tracking ID:

Transaction date:

*** Allow 4–6 weeks for processing, † Allow 3–5 business days for processing**

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