

### COURTESY BILLING REQUEST FORM

(please print)

STUDENT NAME: \_\_\_\_\_

STUDENT ID: \_\_\_\_\_ PHONE: \_\_\_\_\_

**ADDRESS WHERE BILL IS TO BE SENT:**

NAME: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**COURTESY BILL INFORMATION:**

SEMESTER: \_\_\_\_\_ TOTAL # OF ENROLLED UNITS: \_\_\_\_\_

TUITION/REGISTRATION \$ \_\_\_\_\_

HEALTH INSURANCE \$ \_\_\_\_\_

HOUSING \$ \_\_\_\_\_

BOOKS/SUPPLIES \$ \_\_\_\_\_

COURTESY BILL CHARGE \$ \_\_\_\_\_ **10.00 (Subcode 20170)**

MISCELLANEOUS \$ \_\_\_\_\_

**TOTAL COURTESY BILL** \$ \_\_\_\_\_

**THE FOLLOWING DISCLAIMER WILL BE INCLUDED ON ALL COURTESY BILLS:**

The student supplies the Courtesy bill information. The University does not verify actual cost of billed items. Any refund due from overpayment on this account will be payable to the student, regardless of the payment source.

**NOTE:** I am aware that Courtesy Bills are a service provided by the Bursar's Office. I will not hold the Bursar's Office responsible for changes imposed by the Board of Regents. Fees are due by posted dates, regardless of receipt of payment of this Courtesy Bill.

STUDENT SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_  
(required)