



**AUTHORIZATION TO TRANSFER FUNDS  
TRANSFER FROM STUDENT ACCOUNT TO CAMEL CARD**

Date: \_\_\_\_\_

**STUDENT REQUEST:**

Student I.D. #: \_\_\_\_\_ Student Name: \_\_\_\_\_

\_\_\_\_\_ I request the amount of \$ \_\_\_\_\_ to be transferred from my Campbell University account to my Campbell University Camel Card.

Student's Signature: \_\_\_\_\_

Student Contact Information: Email: \_\_\_\_\_

Phone: \_\_\_\_\_

Form must be forwarded to the Business Office for processing! You may hand deliver to the business Office or:

Email to: [sheuringt@campbell.edu](mailto:sheuringt@campbell.edu)

Fax to: 910-893-7863

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**STUDENT ACCOUNTS PROCESSING: (Business Office Section)**

Date Processed: \_\_\_\_\_

Colleague Invoice #: \_\_\_\_\_ Processed By: \_\_\_\_\_

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**BLACKBOARD PROCESSING: (Business Office Section)**

Cashier: \_\_\_\_\_ Date: \_\_\_\_\_

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