ADMINISTRATIVE/LATE FEE ($30) APPEAL FORM

The balance due on the statement is due in full by the due date. Failure to pay the balance due results in a $30 fee. This appeal will not be considered unless your statement balance is paid in full.

Please detail the extenuating circumstances that you feel exempt you from this policy. (Please print or write neatly)

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Student Signature ___________________________________ Date Submitted to Student Accounts ___/___/____

Completed written appeals will be accepted at the Student Accounts Office ONLY. Do NOT submit this form to another office. A copy of this form with a decision, as well as any refund if applicable, will be sent to your permanent address or to your bank if you have signed up for Direct Deposit. Please allow 2 weeks from the submission date for processing. Check "Current Status" on QuikPAY for recent activity on your account.

For Office Use Only

Decision: _______APPROVED _______DENIED

Note to student:______________________________________________________________

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________________________________________________________________________

Signature:_________________________ Date: __________________________

Binghamton University
Student Accounts Office
P.O. Box 6003
Binghamton, NY 13902-6003