



CHI ETA PHI SORORITY, INCORPORATED
REQUEST FOR REFUND

Date: _____

TO: National Tamiochus

FROM: Name: _____

Chapter: _____

Address: _____

City State Zip Code

This request for refund is for the following reason(s):

REASON	AMOUNT PAID	MINUS \$25.00	REFUND DUE
Overpayment of National Tax			
National Cancellation*		////////////////////	
Other (List)			
Other (List)			

Note: * Full refunds are issued for national cancellations ONLY.

Refunds to chapters, due to mathematical errors, shall be issued ONLY for the amount over the processing fee.

Family crisis situations and illnesses are to be verified by the chapter Basileus.

Documentation (ticket stubs, etc.) must be attached.

NATIONAL TAMIOCHUS USE ONLY	Received: _____	Mailed to Tamias: _____
------------------------------------	------------------------	--------------------------------