

STOP PAY REQUEST

By directing TTUHSC Student Business Services to stop payment of the check indicated on this form, I agree to hold Texas Tech University Health Sciences Center harmless against any and all loss, claims, damages, and costs, including court costs and attorney's fees, that may result from stopped payment of the check if it is presented for payment prior to my withdrawal of these instructions.

I also understand that Student Business Services reserves the right to take any necessary action to collect the check indicated on this form in the event that the check has already been presented for payment. This includes cancellation of my enrollment, collection through and/or by a contracted collection agency, including the addition of collection and/or legal costs, a hold being placed on receiving my grades and/or transcripts, a hold being placed on future registrations at TTUHSC, and denial of credit for coursework completed for any term that results in an unpaid balance resulting from this action.

| Student Name | Student R# |
|---|--|
| Please Select: Student Refund Parent Refund | |
| Reason for stop pay: | - |
| Check number: | _ |
| Date of issue: | - |
| Amount: \$ | - |
| Please select how you would like this reissued: | |
| Check (address must be updated in Webraider) Direct deposit (student refunds only) | |
| To set up direct deposit, go to the MyHSCTech tab in Webraider (www.webraider.ttuhsc.edu), go to Student Business Servces->click on the My Direct Deposit->you will add or update your banking information. | |
| Mailing address for refunds reissued as check: Street: | |
| City, State, Zip: | - |
| Signature: | Date: |
| Please click the check box to confirm you have upon | dated your address in Webraider |
| Form may be submitted by fax to (806)743-7873 o | r it may be email to TTUHSC SBS by clicking the submit button below. |