**Returning Electronic Gift Cards**

Please provide the below information to return electronic gift cards.

|  |  |
| --- | --- |
| Department ID: |  |
| Number of Cards Returning: |  |
| Total Amount Returning: |  |
| Study Fund Request Number: |  |

If found that any of the returned cards have previously been used, we agree that the department will be charged for the cards that were identified as such. Please use the below chartfield if that occurs:

GL Chartfield:

|  |
| --- |
|  |

We certify that the electronic card numbers being returned were not provided to participants or anyone outside the study team.

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ - Name/Signature of Department Approver

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ - Name/Signature of Custodian

*All areas must be completed to accept the return of electronic gift cards. Once confirmed, the HSP Study will be refunded to the original chartfield charged and added to Cost Analysis - HSP inventory.*

*If you have any further questions, please contact* [*hsp@admin.ufl.edu*](mailto:hsp@admin.ufl.edu)