



Authorization To Close And Refund Prepaid Card Balances

Send completed form to: **Rapid Financial Solutions**
cardrefunds@rpdfin.com **OR** **Rapid Financial Solutions**
FAX: (435) 213-1523 P.O. Box 6425
North Logan, UT 84341

I hereby authorize Rapid Investments, Inc dba Rapid Financial Solutions to send checks or originate ACH credit entries to the bank account at the depository financial institution named below.

The purpose is to refund balances remaining on prepaid debit cards. The name, address, partial Social Security number and card number(s), are listed below as verification that I am the proper custodian of these funds.

I understand that receipt of funds by ACH credit or check will release Rapid Financial Solutions of any further obligation under the Terms and Conditions. I accept any applicable card closure fees. All fees are found on the website located on the back of the card.

Card Owner Name: _____ **Birth Date:** _____

Address: _____

City: _____ **St** _____ **Zip** _____ **Phone:** _____

Email: _____ **Social Security Number (last 4 digits) xxx-xx-** _____

Card #																			
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If you are requesting a paper check, please check here:

<p>Paper Check: If you would like your refund to be sent as a paper check to the Card Owner's address listed above, please allow up to 15 days from Rapid's receipt of this form for your refund check to arrive.</p> <p>To whom should the check be made out: _____ Attn: _____</p> <p>What address should the check be mailed: Street: _____ City: _____ State: _____ Zip: _____</p> <p>Check memo (IE. Cardholder name, Card #, Client #) : _____</p>
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If you are requesting an ACH Credit to a US bank account please check here:

<p>ACH: Refunds will be made to a valid U.S. bank account via ACH credit within 7 business days of Rapid Financial Solution's receipt of this form.</p> <p>Recipient Bank Name: _____</p> <p>Routing Transit Number (RTN) <table border="1"><tr><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></tr></table></p> <p>Bank Account Number <table border="1"><tr><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></tr></table></p> <p>Name of the owner of this Bank Account _____</p>																																								

Print Name: _____ **Signature:** _____ **Date:** _____