

Box 351560 / Rm. C-121, PAT Seattle, WA 98195

Today's Date: _____

Tel: 206-543-2770 *Fax:* 206-685-0635

Key Return Form

| Key Holder: Full alphanumeric serial #s of keys being returned: Are you leaving the University of Washington (UW) (as staff, student, faculty or otherwise)? Yes No If YES, please specify End Date: | | | |
|--|------|---|--|
| | | Please complete the following: Address (if leaving the University): | |
| | | Email: | |
| Phone: | | | |
| If you are enrolled in the UW direct deposit system, would you like to be reimbursed through direct deposit? Yes No (Please let us know of your address, if you want a check.)PLEASE TAPE KEYS TO FORM & BRING TO C121 | | | |
| FOR OFFICE USE | | | |
| Keys returned: | | | |
| Reimbursement Completed: By | Date | | |
| Entered in Database: By | Date | | |