

Customer Service Request Form

MAIL TO: M.E.M.O., P.O. BOX 8863, CAMP HILL, PA 17001-8863 * Phone # 1(800)922-8079 * Phone # (717) 731-0660 * Fax # 1(800)715-3590 Website Address WWW.MEMOCO.COM

DATE OF CLAIM

(Today's Date)

INSTRUCTIONS: PLEASE READ and PRINT CLEARLY

1. INCLUDE A COPY OF THE MONEY ORDER RECEIPT that was attached to the money order, keeping the original for your records when requesting a replacement money order.
2. A \$15.00 non-refundable processing fee per item applies to photocopies and replacement requests. This non-refundable fee may be changed without notice and will be deducted from any replacement request if the fee is not included with this form. **DO NOT SEND CASH. Payment accepted by money order or cashiers check and must be made payable to M.E.M.O. (No Personal Checks).**
3. A photocopy will be provided if the processing fee is included and the money order has been or becomes cashed.
4. If the money order has not been cashed, a replacement will be processed only if this form is properly completed and signed by the purchaser.
5. If the money order has been damaged or is no longer needed for its original purpose, attach the original money order(s) to this form. **NO FEE IS REQUIRED** when returning an original money order for replacement.
6. This is **NOT** an automatic stop payment. A stop payment is not placed on the money order until a replacement is issued.
7. Allow up to 30 days for processing of replacement money orders, and up to 2 weeks for photocopies.

Name (Print or Type) _____ Daytime Telephone Number _____ Fax Number _____

Current Mailing Address _____ Apt # Suite _____

City _____ State _____ Zip Code _____ Email Address _____

Please Check One Request is For:	<input type="checkbox"/> REPLACEMENT OF NON-CASHED MONEY ORDER (Gift Certificates CANNOT be replaced) *Please remember to include a photocopy of the Purchaser's Receipt.	
	<input type="checkbox"/> Lost / Stolen <input type="checkbox"/> Destroyed <input type="checkbox"/> Mailed, Never Received <input type="checkbox"/> Original Money Order Enclosed (No fee required to replace an original money order)	
<input type="checkbox"/> PHOTOCOPY OF CLEARED / CASHED MONEY ORDER(S) (Regularly provided within 1 to 2 weeks of receiving request) * Please remember to include the \$15.00 non-refundable fee for each of the money order number(s) listed below. Payable ONLY by money order or cashiers check.		

DATE OF PURCHASE	LETTER PREFIX	MONEY ORDER NUMBER	AMOUNT	PAYABLE TO	MEMO OFFICE USE ONLY	
					CLEARED DATE	REFERENCE NUMBER
1.						
2.						
3.						
4.						

If the records of Merchants Express Money Order Company and subsidiaries indicate that the above Money Order(s) has not been paid and a replacement is issued to me, I authorize the Company to stop payment on this Money Order. I further agree to indemnify and hold Merchants Express Money Order Company and subsidiaries harmless against any and all payments, loss, damage, expense and/or liability suffered or incurred by Merchants Express Money Order Company and subsidiaries by reason of my stop payment authorization. If the original Money Order returns to my possession, I will return it to Merchants Express Money Order Company and subsidiaries and use the new Money Order provided. In addition, I agree to repay Merchants Express Money Order Company and subsidiaries the amount of any replacement given by it if this Money Order at any time whatsoever is paid through inadvertence, accident or oversight or demand thereon made by a holder in due course.

Name of Store Where Purchased _____ (Office Copy) _____ SIGNATURE OF PURCHASER _____