

# UNIVERSITY of HOUSTON

## BEVERAGE REFUND FORM

### Beverage Vending Refund Policy

To request a Coca-Cola refund, for purchases made with cash or debit/credit transactions \$5 and above, please download and email the attached "Vending Refund Form" to auxiliarieservices@uh.edu within 5 business days of your stated date of loss. For purchases made with debit/credit transactions below \$5, you may visit the UH Cashier's Office.

### Snack Vending Refund Policy

Canteen is now offering "eChecks" as a solution for customer vending refunds at the snack machines. Simply follow the quick, and easy steps below:

1. Scan the QR code on the Canteen Connect Sticker located at each Canteen Snack Vending machine.
2. Click the icon with 3 lines in the upper left-hand corner.
3. Select "Need a Refund?"
4. Follow the prompts and provide your information.
5. Canteen will send an electronic check straight to the email provided in your refund request.
6. For questions, customers may call 800-631-8962.

### Vending Refund Policy

Auxiliary Services manages the contracts for Coca-Cola and Canteen.

It is our policy that:

- Any refund request submitted may be subject to review at our discretion. Refund reviews will be conducted by the vending contractor and the outcome referred to Auxiliary Services for a final decision.
- Refund requests may be submitted for up to but no later than 5 days past the stated date of loss.
- Each item must be submitted on a single vending refund request form form, no bundling of claims for multiple days will be honored at any of the vending refund locations.
- All required fields of information on the vending refund request form must be completed or the refund will not be referred for review. (Outlet number, machine type, etc.)
- Barring unforeseen circumstances, refund decisions should be made available within 1-4 business days past the completion date of the form.
- Proof of identification (i.e. a UH identification card or other form of recognized picture identification such as a Driver's License or Passport) will be required to submit a refund request.

### Certification of Claim

I certify that the refund request I have submitted is accurate and true as stated.

I further acknowledge that if a review determines that this refund was not valid, that upon notification, I will return the refunded portion to the Business Services Department. Failure to comply may result in all available remedies being exercised, including but not limited to legal prosecution.

Please complete the refund request on the reverse side of this form.

Signature of Refund Requestor: \_\_\_\_\_

Name (printed): \_\_\_\_\_

Date: \_\_\_\_\_

Note: Modification of this Form requires approval of OGC

Office of the General Counsel

Campus Vending Refund Policy & Request Form

OGC-SF-2005-01 Revised 09.24.21

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# HOUSTON COCA COLA BOTTLING COMPANY

COKE PRODUCTS, POWERADE, DASANI, & MINUTE MAID

## Vending Refund Request Form

*All refund requests are subject to review at the discretion of the Department of Business Services  
(Please see Vending Refund Policy on the reverse side)*

Name of person requesting refund: \_\_\_\_\_

Identification #: \_\_\_\_\_

(UH ID#, Driver's License#, etc.)

Student    Staff    Faculty    Other: \_\_\_\_\_  
(Company/Affiliation to UH)

If Staff or Faculty, please provide dept. name & mail code: \_\_\_\_\_

Daytime Phone: \_\_\_\_\_ Work Phone: \_\_\_\_\_

Cell Phone: \_\_\_\_\_ Pager: \_\_\_\_\_  
(Provide area code with number if it is not a UH number)

Email: \_\_\_\_\_

Building name where stated loss took place: \_\_\_\_\_

Room # or location in building: \_\_\_\_\_

Specify product type and Product Line of the machine(s): \_\_\_\_\_  
(i.e. Dasani Water in Coke Machine, etc.)

Provide the machine #: \_\_\_\_\_  
(if not numbered and there are multiple machines in the location, indicate 2nd from left or other directions as needed)

Day and Date of stated loss: \_\_\_\_\_

Time of stated loss: \_\_\_\_\_

Did you call the Vending Services number on the machine to report a repair?  Yes  No

Please provide a brief description of the specific problem with the machine and the reason for this refund request: \_\_\_\_\_  
\_\_\_\_\_

Refund amount requested: \_\_\_\_\_

Coke Product: (Please indicate the appropriate item(s))

Item	Canned Soda	Canned Juice or Drink	20oz Soda	20oz Minute Maid	20oz Nestea	20oz Bottled Water
<b>Amount Lost</b>	\$	\$	\$	\$	\$	\$

Requestor's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Cashier: \_\_\_\_\_ Date: \_\_\_\_\_

Vending Services Approval: \_\_\_\_\_ Date: \_\_\_\_\_