

# MONEY ORDER CUSTOMER REQUEST

**Please Mail This Form To:** Western Union Financial Services Inc. P. O. Box 7030, Englewood, CO 80155 – 7030 1-800-999-9660

## Instructions:

1. This request is to be completed and signed by the purchaser only. This is not an automatic stop payment. A stop payment is placed on the original Money Order when refund is made.
2. Proof of purchase must accompany this request. The original of either of the following is acceptable: a) Money Order receipt; or b) actual Money Order. Please retain a copy of all documents you send for your records. If you do not have the Money Order receipt please complete a Money Order Research Request form. The form may be obtained by calling 1-800 -999-9660 or at [www.westernunion.com](http://www.westernunion.com).
3. Enclose \$15.00 non-refundable processing fee for each request. A separate request form is required for each item being researched. Except as noted below in item 5, requests will not be processed until the \$15.00 processing fee is received. This non-refundable fee may change.
4. If the Money Order has cashed, a photocopy of the cashed Money Order will be mailed to you.
5. NOTICE: Issuer may deduct applicable fees from your refund if the Money Order has not cashed and the required fee is not enclosed with your request. A photocopy of the cashed Money Order will not be processed until \$15.00 processing fee is received.
6. Please allow 30 days for processing. **ALL** requests for information must be in writing. Incomplete or unsigned customer requests will not be processed.

**Money Order #**

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**Amount \$**

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**Date Purchased**

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Money Order was purchased by:

Purchaser's name      First                      Last

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Mailing Address                                      Apt#

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City                                      State                      Zip

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Phone Number:

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"To induce the Issuer to refund to me the face amount of the above Money Order and in consideration of that payment, I authorize the Issuer to stop payment on this Money Order, and agree to reimburse The Issuer for this refund and to hold the Issuer harmless against any and all/or liability to which it may be subject by reason of this refund to me, by reason of my alleged loss of Money Order, or by reason of the negotiation of the Money Order."

Money Order was Payable To (name)

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Money Order was Purchased at (name and address)

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Reason for Request

- ☐ 1. Lost      ☐ 2. Stolen      ☐ 3. Not-used  
☐ 4. Not received      ☐ 5. Destroyed

**PURCHASER SIGN HERE (IN INK); X** \_\_\_\_\_ **DATE:** \_\_\_\_\_