

## Cal 1 Card - Debit Account Payment Form

Date:	
Cal 1 Card ID Number:	
Email Address (optional):	
\ <b>.</b>	(receive info about special promotions and events)
By making this deposit I agree to abide by the Terms & Conditions of the Cal 1 Card debit account. A copy of the Terms & Conditions is available at <a href="mailto:callcard.berkeley.edu">callcard.berkeley.edu</a> .	
Student Signatur	re Date
Debit Account Deposi	t by Check
Please make checks pay	vable to UC Regents & note Cal 1 Card Debit Account on the check.
Deposit Amount:	
Check #:	
Please mail this form to:	Housing & Dining Cashiers Office
	2610 Channing Way
	Berkeley, CA 94720-2272
Phone:	(510) 642-1524
FOR HOUSING & DINING CASHIERS OFFICE USE ONLY	
Cashier's Signature	
Date Processed	

