0ffice Use _ _ _ _ _-_ _ _

Office Use _ _ _ _ _ - _ _ _

PAYMENT TRANSMITTAL - ITEMIZED BY BORROWER

Campus Partners
Post Office Box 2902
Winston-Salem, NC 27102

☐ Check(s) Attached ☐ Regular
☐ Check(s) Not Attached ☐ Tax Offset

Use This Transmittal Only for Payments Applied to the Borrower's Account (i.e., loans billed together on one statement).
Please keep a copy for your records.

Institution Name | Program No. | Transmittal No. | Date

Office Use Only
SRC | ID | Pmt. Type

Advance Payment Flag
A = Payment applies to Future Installments

	Name	Borrower No.	Cons. No.	Tran Date	Payment Amount	Adv. Pymt. Flag
1						
2						
3						
4						
5						
6						
7						
8						
9						
10						
11						
12						
13						
14						
15						
16						
17						
18						
19						
20						

Your Name _____

Phone _____ Date _____

Checks Total | Payment Total

P-9227 (03-00)