

Binghamton University

BUC\$ Deposit Form

Name (Last, First, MI) of Card Holder

BU ID Number (found on front)

Home or Cellular Number

Deposit Amount

(____) _____

\$ _____**.00**

Type of Payment (check one)

Cash

Don't mail cash

Check payable to:

Sedexo Campus Services

Discover

Master Card

VISA

American Express

If paying by **credit card**, please include the following information.

Card Number: _____ Expiration Date: _____

Print Name on Card: _____

Signature of Cardholder: _____ Date: _____

Signature of Student (if different from above): _____

Dining Services is not responsible for cash sent through the mail.

Add funds and view transactions

online at:

www.BUdining.com

select **Account Access tab**

In person at the Meal Plan Office located
in the University Union East (UUE) near
the Susquehanna Room

Mail Completed Form to:

Meal Plan Office
Binghamton University
P.O. Box 6000
Binghamton, New York 13902-6000

(607) 777-6000 Meal Plan Office
(607) 777-6434 **Fax Number**
(888) 858-9167 Toll Free Number

To learn more about BUC\$ go to **<http://bucs.binghamton.edu>**