## CANCELLATION/REFUND/PAID IN FULL FORM

SECTION 1 Lender Code:	
Lender Name:	
Signature:	
Date:	



P.O. Box 82507, Lincoln, NE 68501 1300 O Street, Lincoln, NE 68508

p: 800.735.8778 f: 402.479.6658

Date:			_							
SECTION 2										
Α	В	c	D	E	F	G	Н	<u> </u>		К
SOCIAL SECURITY NUMBER	BORROWER NAME	GUARANTEE NUMBER OR LOAN TYPE & LOAN PERIOD	CANCEL ENTIRE LOAN	CANCEL DISB 1 (MM/DD/YY)	CANCEL DISB 2 (MM/DD/YY)	CANCEL DISB 3 (MM/DD/YY)	CANCEL DISB 4 (MM/DD/YY)	REFUND* AMOUNT	PAID IN FULL DATE (PIF) (MM/DD/YY)	PIF TYPE