



CHICK-FIL-A® GIFT CARD

Cash Back Request

It is our pleasure to help with your cash back request...

HOW TO SUBMIT

Preferred method: Email

Email this completed form and a
JPG or PDF of the front and back
of the gift card to:

treasurycares@chick-fil-a.com

or

Mail

Send this completed form and copies of
the front and back of the gift card to:

Chick-fil-A, Inc.
Attn: Cash Back Request (Treasury Dept.)
5200 Buffington Road
Atlanta, GA 30349

Chick-fil-A Gift Cards are not redeemable for cash except as required by applicable law due to compliance with Federal and State laws regulating the issuance and sale of gift cards, and then only to the extent required by applicable law.

After redeeming a gift card in a state or territory that has a law requiring Chick-fil-A to provide cash back on remaining small gift card balances (listed below) and the applicable card balance threshold has been satisfied, you may obtain cash back by:

**Fully completing, signing (digital signatures are acceptable), and returning this form,
including a copy or picture of the front and back of the gift card, via email or mail as noted above.**

For properly submitted requests, a check will be issued within 30 days of the form receipt and sent to the address provided below. The current list of states and territories with gift card cash back requirements and threshold levels are:

California	For gift card balances of less than \$10.00	New York	For gift card balances of less than \$5.00
Colorado	For gift card balances of \$5.00 or less	Oregon	For gift card balances of less than \$5.00
Connecticut	For gift card balances of less than \$5.00	Puerto Rico	For gift card balances of less than \$5.00
Hawaii	For gift card balances of less than \$5.00	Rhode Island	For gift card balances of less than \$1.00
Maine	For gift card balances of less than \$5.00	Texas	For gift card balances of less than \$2.50
Massachusetts	For gift card balances of \$5.00 or less for reloadable cards or 10% of original face value for non-reloadable cards	Vermont	For gift card balances of less than \$1.00
Montana	For gift card balances of less than \$5.00	Washington	For gift card balances of less than \$5.00
New Jersey	For gift card balances of less than \$5.00		

CUSTOMER INFORMATION

Name _____ Phone No. _____

Address _____ City _____ State _____ Zip _____

Email Address _____

By signing below, I acknowledge that I am the owner of the gift card and am entitled to receive cash back under the laws of the state (or territory) in which the last card transaction occurred. I authorize Chick-fil-A, Inc. to close the gift card and send me a check for the remaining balance.

Signature _____ Date ____/____/____