



## Payroll Stop Payment Request Form

### Treasurer's Office Use Only

|                           |  |
|---------------------------|--|
| Bank Transaction Date     |  |
| Voucher ID                |  |
| Reissue Check Number/Date |  |
| Recorded Date             |  |
| Processed By              |  |

### Campus Payroll Department Use Only

|                   |  |                 |  |
|-------------------|--|-----------------|--|
| Campus            |  | Date of Request |  |
| Name of Requester |  | Campus Phone    |  |

#### Request Type (Select One):

|  |   |
|--|---|
|  | <b>Check Copy Request</b> (Complete Section 1)                                      |
|  | <b>Stop Payment Request - Do Not Reissue/Payroll Reversal</b> (Complete Section 1)  |
|  | <b>Stop Payment Request - Reissue Check To Employee</b> (Complete Sections 1 and 2) |

#### Section 1: Check Information

|              |  |            |  |              |  |
|--------------|--|------------|--|--------------|--|
| Employee ID  |  | Payee      |  |              |  |
| Check Number |  | Check Date |  | Check Amount |  |

#### Section 2: Reissue Information *Reissued payroll checks cannot be sent to a payroll office.*

|                      |  |          |  |  |
|----------------------|--|----------|--|--|
| Payee Name           |  |          |  |  |
| Address Line 1       |  |          |  |  |
| Address Line 2       |  |          |  |  |
| Address Line 3       |  |          |  |  |
| City                 |  |          |  |  |
| State                |  | Zip Code |  |  |
| Country (if not USA) |  |          |  |  |