



Departmental Check Cancellation Request Form

Please complete each section that applies. Instructions for this form can be found @ http://bursar.uchicago.edu

Once the form is completed please return to:

PPS Help Desk at Financial Services 6054 S. Drexel Ave. - Suite 400, Chicago, IL 60637 or pps@uchicago.edu

Date: _____

Phone: _____

Requester: _____

Email: _____

Department: _____

Please select ONE of the following:

Cancel Only

Cancel & Reissue

Is a Stop Payment Needed? (Y/N)* _____ Is the original check attached? (Y/N) _____

*It is the responsibility of the department requesting the stop payment to contact the payee/vendor to notify them of the stop payment and the check will not be honored for payment. Failure to notify the payee/vendor of a stop payment may result in your department covering any assessed bank fees.

Check Information (required):

Payee: _____

FAS Account: _____

Check Number: _____

Voucher Number: _____

Check Date: _____

Vendor Number: _____

Check Amount: _____

Reason for Cancellation (please select one):

Check Never Received

Wrong Amount

Check Returned by Bank/Stale

Duplicate Payment (paid on voucher _____)

Incorrect Vendor Spelling

Ineligible Student

Other: _____

Incorrect Vendor

Loan Adjustment/Cancellation

Check Reissuance Information (if applicable**): ** Per Policy 2703, lost, misplaced or destroyed checks less than one year old require a written/email statement from the payee/vendor indicating why check reissuance is required. Checks older than one year require a completed and notarized affidavit. Checks are only reissued if supported by either the original voided check, a written/email statement or a completed and notarized affidavit.

Select delivery directions for reissued check:

Department will pick-up at PPS/Financial Services

U. S. mail to address indicated below

Payee: _____

Address: _____

Bursar's Office/Financial Services use only

Received by:

Date Received: