

A/P Dept:

Check Void/Reissue Form

(Check On	e) Void Req	uest_ Check Reissue Request							
Reque	estor/Pay	ee:						1		
Check Date:					Check Amount:					
REASO	ON FOR V	OID:								
Reque	estor's Sig	nature:		Dat			e:			
If this is a request to reissue the check, please complete the following sections:										
I hereby declare that I am legal owner or custodian of the above-referenced Texas Southern University check. I have not received the proceeds from the check and understand that if I find the original check, I cannot cash it but must return it to Texas Southern University's Treasurer's Office.										
Signature:								Date:		
Social	Security	Number: or	Federal Tax ID)						
I am requesting that the above check be reissued for the following reason: ☐ CHECK NEEDED ☐ Lost/Stolen Incorrect Amt. ☐ Incorrect Address ☐ Stale Dated ☐ ADDRESS OF WHERE THE CHECK SHOULD BE MAILED ☐ OR HOLD FOR PICK UP ☐ incorrect payment amount ☐ PAYMENT WENT TO INACTIVE E-CARD										
Current Address:										
CITY						TX		Zip		
FOR TEXAS SOUTHERN UNIVERSITY'S USE ONLY										
Date of	Stop Payr	ment:			Date Stop Payment Confirmed: (Attach Bank Confirmation)					
		ached (Circl	e One):		YES			NO		
Replacement Check No.:				Da	ite:		Amo	unt:		
Treasury Dept:								e:		

Date:

S or I

Document#