

Void Check Request Form

Void Only

Void and Reissue

Date: _____

Banner Invoice #: _____

Requested by: _____

Payee: _____

Check #: _____ Check Date: _____ Check Amt: _____

Reason for Void:

Never received the check

Lost

Incorrect Amount

Incorrect Vendor

Other: _____

For Accounts Payable Use Only:

Bank: _____ Unclaimed Property: Yes No, If Yes, Year: _____

Check Cleared: Yes No Clear Date _____

Voided in Banner: Yes No Voided in Intellecheck: Yes No

Replaced: Yes No

Void positive pay file transmitted to the bank.

Complete by: _____ Date: _____