

# Cancelled Check Form

Accounting Office  
3606 ASB

Date \_\_\_\_\_

Please cancel:

Check # \_\_\_\_\_

Voucher # \_\_\_\_\_

Check Amount \$ \_\_\_\_\_

Payable to: \_\_\_\_\_

Reason:

Department \_\_\_\_\_

Requested by: \_\_\_\_\_

\_\_\_\_\_  
Signature

This form is used to cancel a check in the University's check reconciliation system and to reverse any accounting transactions associated with it. Examples include a check written to the wrong payee, written for an incorrect amount, or no longer needed. An authorized departmental representative must sign the form. It should then be forwarded with the check to the Accounting Office, 3606 ASB, for processing.

If a check has been lost and needs to be replaced, please contact the Accounting Office, 294-5181, to request a stop payment and replacement, rather than canceling it and creating another voucher. There is no form to complete to request a stop payment and a replacement of a check.