Financial Services Department

Void Check Request Form

TODAY'S DATE:

Check Details

Important! If you DO NOT have the physical check, use the **Stop Check Request** form instead.			
CHECK NUMBER	CHECK DATE	ORIGINATING DEPARTMENT	CONTACT PHONE NUMBER
PAYEE			AMOUNT $

Void Check

Advance Not Used	Explanation:	
Issued in Error	Explanation:	
Invoice Paid on Another Check	Check Number:	Check Date:
Other:	Explanation:	

Unclaimed Property (check still owed, cannot locate payee)

Issued to Wrong Payee

Issued in the Wrong Amount

Void and Reissue Check

Check Damaged

Check Stale Dated

SEND CHECK TO

STREET ADDRESS

CITY	STATE	ZIP

Signature

NAME (PRINT NAME)	DATE	

Attach the check and send to Financial Services, 76 S. Laura St., Suite 202, via interoffice, electronic, or postal mail.
Questions? Contact the Financial Services Department at (904) 297-4437 or email accounts@eliteparkingofamerica.com

RECIPIENT EMPLOYEE ID NUMBER: CLAIMIANT EMPLOYEE ID NUMBER: