Payment Services * Disbursements
1200 E. California Blvd., Pasadena, CA 91125
Mail Code 114-6
Fax (626) 577-8486
Email: PPSDisbursements@caltech.edu

STOP PAYMENT REQUEST

Today's Date: _____

Check Number: _____   Check Date: _____   Check Amount: $_____

Payable to: _____

Type of Request: □ Void / Do Not Reissue   □ Reissue

Reissue to: _____

New Address if Changed: _____

Reason for Stop Payment: □ Lost   □ Wrong Payee

                                  □ Incorrect Amount   □ Cash Reissued

                                  □ Paid by PCard   □ Other

Explanation if "Other": _____

Mail Stop Payment Request form along with any damaged or incorrect checks to: **Disbursements, M/C 114-6**. Requests for lost checks can be *emailed* to PPSDisbursements@caltech.edu.

Requestor's Name: _____   Date: _____

Email: _____   Ext.: _____

I request Disbursements to stop payment on the check described above. I certify that the item description, date, and payee are correct. I understand that "<u>accurate</u>" payment information is required in order for Disbursements to complete a stop payment request.