

Payroll Services  
Stop Payment & Reissue Request

All fields must be completed in ink.

Date of Request: \_\_\_\_\_

Requestor Information:

Name: \_\_\_\_\_

Banner #: \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Phone Number: \_\_\_\_\_

Attn: Florida Southwestern State College, Payroll

I certify that I have not received my payroll check # \_\_\_\_\_ issued on  
\_\_\_\_/\_\_\_\_/\_\_\_\_ in the amount of \$\_\_\_\_\_. I am requesting Florida  
Southwestern State College place a stop payment on this check and reissue to me (*please  
mark one of the following*):

via U.S. Postal Service to the address above; or

for pick up at the Lee | Charlotte | Collier | Hendry Campus – Cashier’s Office.  
(CIRCLE ONE)

If the above referenced check is located after placing this stop payment and reissue  
request, I will return the check to Florida Southwestern State College. **I understand that  
Florida Southwestern State College will not be responsible for any fees charged by  
my financial institution if I attempt to deposit the missing check after I place this  
stop payment and reissue request.** Thank you for your assistance in this matter.

\_\_\_\_\_  
Requestor’s Signature