



CALIFORNIA STATE UNIVERSITY
FULLERTON

APPLICATION TO STOP PAYMENT

- REISSUE CHECK
- DO NOT REISSUE CHECK

PLEASE PRINT CLEARLY

LAST NAME FIRST NAME MI CWID#

ALL REISSUED CHECKS WILL BE MAILED TO THE ADDRESS CURRENTLY ON FILE WITH THE UNIVERSITY.
IF YOUR MAILING ADDRESS HAS CHANGED, LOG INTO YOUR TITAN ONLINE STUDENT PORTAL
AT WWW.FULLERTON.EDU, TO CORRECT YOUR ADDRESS

TYPE OF CHECK

- REFUND
- FINANCIAL AID

EXPECTED CHECK AMOUNT

DATE CHECK WAS ISSUED

.

INDICATE REASON FOR THIS REQUEST

- I NEVER RECEIVED THIS CHECK
- I LOST THIS CHECK

I understand that the Stop Payment process will take up to (10) business days before a replacement check can be issued. If I find this check, I will return it to the University and a replacement check will be issued within seven (7) business days. The information I provided is true and correct to the best of my knowledge.

SIGNATURE

DATE

DELIVER OR MAIL APPLICATION TO: CALIFORNIA STATE UNIVERSITY, FULLERTON
 DEPT: STUDENT FINANCIAL SERVICES (UH-180)
 PO BOX 6808, FULLERTON, CA 92834-6808

OR FAX TO: (657) 278-4630

FINANCIAL SERVICES OFFICE USE ONLY

AMOUNT OF CHECK

CHECK #

.

CHARTFIELD

DATE CHECK WAS ISSUED MM/DD/YY

Account (6) Fund (5) Department (5) Program (4) Class (5) Project (8)

DATE CHECK WAS ISSUED MM/DD/YY

CHARTFIELD

Account (6) Fund (5) Department (5) Program (4) Class (5) Project (8)

I have submitted a Stop Payment Request on:

The check was returned to the University

SIGNATURE

DATE