

NOTE: In order to save the document, user must have the most recent version of Adobe Acrobat Reader.

**STUDENT ACCOUNTS LOST CHECK FORM**

Date: \_\_\_\_\_

Our records show that Michigan State University issued the following student refund check:

Check Number: \_\_\_\_\_ Check Amount: \_\_\_\_\_

Check Date: \_\_\_\_\_ (Student) PID#: A \_\_\_\_\_

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

This check has not yet cleared through our bank. According to you, this check was either:

- Lost  Destroyed   
 Stolen  Never Received

Please complete the section below and return this notice to our office immediately. Upon receipt of the completed form, we will issue a replacement check at such time as our bank provides all necessary information to the University.

“I authorize Michigan State University to stop payment on the above check and to issue a replacement check. I agree that if the original is recovered it is to be returned promptly to your office. I also authorize Michigan State University to apply the funds from the check to my account, if I have an outstanding balance with the University. I further agree that if both the original and replacement checks are cashed under circumstances resulting in overpayment to myself, I will promptly reimburse the University for the amount of overpayment or (if applicable) hereby authorize the University to deduct the amount of such overpayment from my next payroll check(s). I also understand that I will be charged a \$25 Check Replacement fee that will be waived if I sign up to have my refund direct deposited.”

“If I am enrolled as a student, I hereby waive my right to additional notification prior to placement of a financial hold.”

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**PLEASE NOTE: If you cash a check that you have requested to be stopped, your bank may charge you for the returned check. Please call 517-355-5050 or 800-775-4323 to verify if a stop payment was placed.**

**DIRECT DEPOSIT (no fee)**

**MAIL CHECK (\$25 fee)**

Mailing Address (please print clearly)

\_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

Email \_\_\_\_\_

Phone \_\_\_\_\_

**For office use only**

1. Stop payment placed by: \_\_\_\_\_ Date: \_\_\_\_\_
2. Replacement authorized by: \_\_\_\_\_ Date: \_\_\_\_\_
3. Check Reissued: \_\_\_\_\_ Date: \_\_\_\_\_
4. Confirmation Attached: (yes/no): \_\_\_\_\_



**OFFICE OF THE CONTROLLER**

**Student Accounts**

Hannah Administration Bldg  
 426 Auditorium Rd Rm 140  
 East Lansing, MI  
 48824-2602

517-355-5050  
 Toll Free: 800-775-4323  
 FAX: 517-353-9640  
 Email: Student Accounts  
 @ctrl.msu.edu

http://ctrl.msu.edu