

Stop Pay Request Form for Account Payable

Transaction Reference Number (check #)	
Voucher Number(s)	
Supplier Name	
Supplier ID	
Payment Date	
Payment Amount	
Void Code	
Cancel Invoice?	
Reissue?	
Reissue Instructions	

Submitted By		Date
Approved By		Date

VOID CODES:
Lost
Duplicate Payment
Paid Wrong Amount
Paid Wrong Supplier
Paid Right Supplier-Wrong Remit To
Outdated Check
Miscellaneous (Specify Reason)

Required Supporting Documentation:

- Any emails associated with the Stop Pay Request