

## CANCELLATION OF A PAYROLL CHECK

### Overview:

If an employee is completely overpaid and a check has been created, the Department must submit the physical check and a request to Payroll Services for cancellation. If the original check is lost or otherwise unavailable, the department will need to submit a Stop Payment/Reissue request. When the reissued check is received, it should be submitted to Payroll Services for cancellation.

If an employee works for multiple departments or is otherwise due any part of the check, this method **cannot** be used. The check must be given to the employee. Recovery will either be done via correction in Workday or the department will need to request a payback amount.

### Process:

- 1.) Make sure the employee's job is terminated/corrected.
- 2.) Complete the check cancellation form in its entirety.
  - Only one check can be listed per form.
  - Request **MUST** include all required Employee and Driver Worktag information. Requests will be returned if information is missing. Please do not use any old PHR or KFS information.
    - Employee Cost Center and Job/Position number is shown on the employee's profile page. They are combination of Letters and Numbers.
    - Ledger Accounts & Spend Categories can be found by running the KFS Object Code to Workday Value report.
    - Grant/USource Worktags can be found by running the KFS Account to Driver Worktag report.
  - For Final Leave Payouts, the Ledger Account is 52200 and the Spend Category is SC00001.
  - Provide a detailed reason why the check needs to be cancelled.
- 4.) Print Name, Date, and Email Address.
- 5.) Send the form and actual check to Jo Anne Mealo Wentz in Payroll Services via Campus mail or drop the documents off in the Payroll Services mailbox in the 1<sup>st</sup> floor hallway of the Chesapeake Building.

## **CHECK CANCELLATION FORM**

W Number \_\_\_\_\_  
 (Payroll Services Use Only)

Submit To: **Jo Anne Mealo-Wentz**  
**Payroll Services**

An asterisk (\*) denotes a required field

### **Part I: Employee Information**

<b>*Campus</b>	UMCP	UMES	UMCES	UMSO
<b>*Employee UID:</b>	<b>*Employee Position: Number</b>			
<b>*Employee Name:</b>	Last Name	First Name	M.I.	

### **Part II: Paycheck Information**

*Paycheck Date	Finance Driver Worktags				*% of Pay
	*Ledger Account	*Cost Center	*Revenue/Spend Category	*Grant/USource	

**\*Physical check must be included with the form.**

### **Part III: \*Cancellation Reason**

### **Part IV: Certification by Department**

I hereby certify that the attached payroll check should be cancelled because the employee is not due any of the funds.

**\*Printed Name**

**\*Date**

**\*Division/Department**

**\*Email Address**