

SPAHRs Void Vendor Warrant Request

Dept of Finance and Administration
OFM/Bureau of Financial Control
701-B Woolfolk Bldg.
501 North West Street
Jackson, MS 39201

Agency: _____

Payroll Officer: _____

Phone: _____ Date: _____

E-mail Address: _____

A. Enter information for the vendor warrant to be voided:

SPAHRs Ag #	Warrant #	Amount
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B. Please check type of void, and provide explanation in Section D. Attach required documents, such as indemnity bond, etc.

- 1. Void and do not re-issue
- 2. Void and re-issue for same amount to same vendor. See 19.20.30 for required attachments. (BFC - Do not suspend.)
- 3. Void and re-issue for same amount to a different vendor. New Vendor Number _____
- 4. Void and re-issue partial payment to a different vendor. Screen print Suspended Items from Warrant Payment screen (PA RD SI) and mark the items to be paid to another vendor. New Vendor Number _____
- 5. Void and re-issue for a lesser amount. Screen print Suspended Item from Warrant Payment screen (PA RD SI) and mark the items **not** to be paid.

C. Complete this section if the individual is due a refund:

- 1. Has the individual refund been processed? Yes No (if No, skip to 3.)
- 2. Has credit from the refund been applied? Yes No
- 3. Will a refund be issued? Yes No (if Yes, date payment will be issued? _____)

D. Explain why it is necessary to void the warrant:

DFA USE ONLY		
Date Processed	Initials	Run #