

GOVERNMENT OF
THE UNITED STATES VIRGIN ISLANDS



Mailing Address:
2314 Kronprindsens Gade
Charlotte Amalie, VI 00802

Street Address:
76 Kronprindsens Gade
Charlotte Amalie, VI 00802

DEPARTMENT OF FINANCE

REQUEST FOR RE-ISSUE OF BANK REJECTED CHECK

Department/Agency: _____ Date: _____

Name and Address of Payee:

Check Information:

No.: _____
Date: _____
Amount: _____
Bank: _____

Contact Information: Phone: _____

Email: _____

Signature of Payee

Date: _____

Agency Representative (Print): _____ Signature: _____

**Original/Facsimile Check From Bank, along with copy of Payee's Official ID Should
Accompany Request**

For Department of Finance Use Only

APPROVED:

Treasury Division

By. _____ Date: _____

Title: _____

Accounting Division
Control Section

By. _____ Date: _____

Title: _____

Replacement Check No.: _____ Dated: _____