## **Check Print Reversal Request**

Primary Taxpayer:			Customer ID / SSN		
Secondary Taxpayer:			for one Taxpayer:		
Amount of Chooks		]	(Customer ID can	be obtained at www.sbtpg.cor	n) 
Amount of Check:			Date:		
	<u>T.</u>	ax Prepare	<u>r</u>		
By signing below, I d	do attest to and ag	ree to the follow	ing:		
I am unable to print t	he check print autho	orization file that	was sent to me by TPG	. (Select one of the follo	owing):
I am requesting TP	G to cancel current ch	neck print authoriza	tion and to re-transmit	a new check authoriza	ition.
☐ I am requesting T	PG to print check ar	nd mail to Taxpay	er's address on file or t	ill out new address	below.
	1	<u> Taxpayer</u>			
By signing below, I	(or We if joint retu	rn filed) do attes	t to and agree to the	following:	
Tax Products Group ( amount indicated ab	•	ر Tax Preparer to ہ	orint a cashier's check	for me in the	
I am unable to obtain office is closed.	n the cashier's check	because my Tax	Preparer cannot print	the check or the	
	•	•	check print authorizat ail it to my address bel		
	TPG to print me a n	•	ail it to my address bel		
☐ I am requesting  Taxpayer's Street Ad	TPG to print me a n Idress  mburse TPG for the	City	ail it to my address bel S Siginal check if that ch	tate Zip Code	
Taxpayer's Street Ad  I agree that I will rein printed and cashed of Attach the following documents are NOT	TPG to print me a numburse TPG for the and I have also cash documents for each meeded if the Tax Panment-issued picture	City  amount of the or hed the replacem Taxpayer named reparer has proven by the control of the	sil it to my address bel Siginal check if that cheent check. If on the check. NOTE: ided their signature anse, State ID Card, U.S.	tate Zip Code  eck is  The following nd EFIN below.	ry ID)
Taxpayer's Street Ad  I agree that I will rein printed and cashed of Attach the following documents are NOT ~ Unexpired govern ~ Social Security Ca	Idress  Idress  In the late of	City  City  amount of the orned the replacem Taxpayer named reparer has prove ID (Driver's Licerard must be sign Completed Form, r E-Mail to cisc30	sil it to my address belong in all check if that check. If on the check. NOTE: ided their signature and se, State ID Card, U.S. and ID and SS Card) to 85 as by a set possible	tate Zip Code  eck is  The following nd EFIN below. Passport, U.S. Milita	
Taxpayer's Street Ad  I agree that I will rein printed and cashed of Attach the following documents are NOT ~ Unexpired govern ~ Social Security Ca  Please FA	TPG to print me a not be a first the and I have also cash documents for each meeded if the Tax Planent-issued picture and (Social Security Coux ALL documents (Output Coux ALL documents)	City  amount of the or need the replacement of the provent of the sign of the sign of the sign of the cisc of the completed form, or E-Mail to cisc 30 or 22 hours to process.	sil it to my address belong in all check if that check. If on the check. NOTE: ided their signature and the check is seed. ID and SS Card) to 85.	tate Zip Code  eck is  The following nd EFIN below. Passport, U.S. Milita  8-430-2795  ocuments are receive	ed.
Taxpayer's Street Ad  I agree that I will rein printed and cashed of Attach the following documents are NOT ~ Unexpired govern ~ Social Security Ca  Please FA	Idress  Idress  Indurse TPG for the and I have also cash documents for each meeded if the Tax Planent-issued picture and (Social Security Cox ALL documents (On ay take from 24 to 7 its bank partner will	City  amount of the or need the replacement of the provent of the sign of the sign of the sign of the cisc of the completed form, or E-Mail to cisc 30 or 22 hours to process.	sil it to my address belong in all the check if that check if that check if the check. NOTE: ided their signature and the check if the check ided their signature and the check ided their signature and the check ided ided ided ided ided ided ided ide	tate Zip Code  eck is  The following nd EFIN below.  Passport, U.S. Milita  8-430-2795  ocuments are received in processing this received.	ed. quest.