

MESSENGER SUBMITTAL/REJECTION SHEET FOR RETURN CHECK CASES

For Department Use Only Address will go here (see below)

	Address will go fiele (see below)
Messenger No.:	First Date Submitted:
	Second Date Submitted:(If applicable)
PETIII	RN CHECK INFORMATION
	Case #
VEHICLE INFORMATION:	DRIVER INFORMATION:
Name:	Name:
Address:	Address:
Title Number :	
Registration Plate Number:	
Messenger should list any WID numbers (if ap	
):
F	OR BUREAU USE ONLY
Date Processed:	Initials:
Date Rejected:	Initials:
Additional or insufficient fees have been subm	itted and are due as follows:
Please submit a certified check or money ord amount due of:	der made payable to the Commonwealth of Pennsylvania for the total
If you have questions, you may contact	in the Return Check Unit at Thank you.