

Pennsylvania State Collection and Disbursement Unit (PA SCDU)

Temporary Payment Coupon

**Member Name :** \_\_\_\_\_

(Please include complete first and last name)

**Member Number :**

**Member Social Security Number :** --

**Payment number :** \_\_\_\_\_ **Payment amount :** \_\_\_\_\_

(Enter Check or money order number  
from payment submitted with this coupon)

**Mail Payments to : Pennsylvania SCDU**  
**PO Box 69110**  
**Harrisburg Pa 17106-9110**

