

Check Payment Halt Request

Date: [Insert Date]

[Your Name]

[Your Address]

[City, State, Zip Code]

[Email Address]

[Phone Number]

[Recipient Name]

[Company/Organization Name]

[Company Address]

[City, State, Zip Code]

Dear [Recipient Name],

I am writing to formally request the halt of payment for check number [Insert Check Number], which was issued on [Insert Issue Date] due to [reason for payment halt].

As per our previous communication, I believe it is necessary to stop the payment to avoid any further complications. Please find attached any relevant documents pertaining to this matter.

Thank you for your attention to this issue. I look forward to your prompt response confirming the halt of payment.

Sincerely,

[Your Signature (if sending a hard copy)]

[Your Printed Name]