

Stop Payment Request Letter

Date: [Insert Date]

[Your Name]

[Your Address]

[City, State, Zip Code]

[Your Account Number]

[Bank Name]

[Bank Address]

[City, State, Zip Code]

Dear [Bank Manager's Name],

I am writing to formally request an immediate stop payment on the following check:

- Check Number: [Insert Check Number]
- Amount: [Insert Amount]
- Date of Issue: [Insert Date of Issue]
- Payee: [Insert Payee's Name]

This request is necessary because [briefly explain reason, e.g., the check was lost/stolen or there is a dispute]. I understand that there may be a fee associated with this service, and I am willing to accept any applicable charges.

Please confirm receipt of this stop payment request and notify me once the action has been completed. You can reach me at [Your Phone Number] or [Your Email Address] if you need any further information.

Thank you for your prompt attention to this matter.

Sincerely,

[Your Signature (if sending a hard copy)]

[Your Printed Name]