

[Your Name]  
[Your Address]  
[City, State, Zip Code]  
[Email Address]  
[Phone Number]  
[Date]

[Bank Name]  
[Bank Address]  
[City, State, Zip Code]

Subject: Stop Payment Authority

Dear [Bank Manager's Name],

I am writing to request a stop payment on the following check:

- Check Number: [Check Number]
- Date of Check: [Date of Check]
- Amount: [Amount]
- Payee: [Payee Name]

The reason for this stop payment request is [reason for stop payment].  
Please consider this letter as formal authorization to halt any  
processing of the aforementioned check.

I understand there may be fees associated with this request and am  
willing to cover any applicable charges. Please confirm that my request  
has been processed and advise on any further actions I may need to take.  
Thank you for your prompt attention to this matter.

Sincerely,

[Your Signature (if sending a hard copy)]  
[Your Printed Name]  
[Account Number]