



Stop Payment Confirmation

Prior to voiding a check, it is necessary to ensure the check cannot be cashed at any point in time. This form authorizes us to place a stop payment on a check that has been **lost** or **misplaced**. If you are in possession of this check, simply destroy the check, void the check within the payroll system, and **do not** submit this form. Please indicate the details of the check(s) you would like to place a stop payment on:

Company Number _____ Company Name _____

Employee ID	Employee Name (Last Name, First Name)	Check Date	Check Number	Net Amount

*This form is written authorization for Paylocity to stop payment on all requested checks. A non-refundable stop payment fee of \$15 will be assessed for each of the checks indicated above. The check(s) must be voided within the payroll system in order to receive a refund for the check amount.

This confirmation serves as notification to Paylocity of the stop payment(s) you are requesting. If you have any questions, please call Paylocity at (847) 956-4850. When signed and completed, please fax this form to (847) 956-1926. If you prefer to fill out this form on a computer, you may e-mail it to us at Banking@paylocity.com.

_____ / ____ / ____

(Signature)

(Title)

(Date)