|  |  |
| --- | --- |
| **Office of State Treasurer**  **Stop Payment/Hard Cancel Request** | **Seal** |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
|  | (X) **STOP PAYMENT** |  | Date: |  |

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
|  | (X) **HARD CANCEL** | - ***Must Attach Warrant*** |  |  |  |  |  |

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Agency Number** | **Account Number** | | | | **Warrant Number** | | **Issue Date** | | | | **Payee Name** | | **Amount** |
|  |  | | | |  | |  | | | |  | |  |
|  | | | | | | | | | | | | | |
|  | | | | | | | | | | | | |
| Requested By: | |  | | | | | | Signature | | | | | |
| Requesting Agency’s Name: | | | | | |  | | | | | | | |
| Email Address: | | | |  | | | | | | | | | |
| Fax Number: | | |  | | | | | | Phone Number: | | |  | |
|  | | | | | | | | | | | | | |
| **OST OFFICIAL USE ONLY** | | | | | | | | | | | | | |
|  | | | | | | | | | |  | | | |
|  | | | | | | | | | | Date Entered: | |  | |

**2300 North Lincoln Boulevard**

**State Capitol Room 217**

**Oklahoma City, Oklahoma 73105**

**Fax: (405) 522-4508**