



NEWCASTLE PUBLIC SCHOOLS

Request to Stop Payment / Re-Issue Warrant

Warrant Issued To:	
Warrant Date:	
Warrant Number:	
Person Requesting Stop Payment / Re-Issuance:	
Reason for Stop Payment Request:	

By signing this form the requesting party acknowledges should the original Warrant be received, discovered or reconstructed they will immediately destroy said Warrant. Any attempt to cash or deposit said Warrant will be considered as theft against the school district and will be prosecuted as such.

Signature	Date

This document to filed with the purchase order.