



**STATE OF MISSISSIPPI  
TREASURY DEPARTMENT**

**DAVID MCRAE**  
STATE TREASURER

POST OFFICE BOX 138  
JACKSON, MS 39205  
TELEPHONE (601) 359-3600

**STOP PAYMENT REQUEST**

Agency: \_\_\_\_\_

Address: \_\_\_\_\_

E-mail Address: \_\_\_\_\_

Contact Person: \_\_\_\_\_ Phone: \_\_\_\_\_

Warrant Number	Warrant Date	Fund	Payee	Warrant Amount	V or R *

**\* Requested DFA/BFC Action**

Please indicate DFA action in the V or R column above for action to be taken by DFA:

V = Void (No Warrant Reissued)                      R = Void & Reissue (Lost Warrant Replacement Request Form Attached)

Reason: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Treasury & DFA Use Only		
	Date:	By:
Treasury		
DFA		