

MELISSA J. DAVEY  
STANDING CHAPTER 13 TRUSTEE  
Northern District of Georgia  
233 Peachtree St. NE, Suite 2250  
Atlanta, Ga 30303 (678)510-1444

**STOP PAYMENT REQUEST AFFIDAVIT**

Check #: \_\_\_\_\_ Case# \_\_\_\_\_  
Date of check: \_\_\_\_\_  
Amount of check: \_\_\_\_\_  
Payable to: \_\_\_\_\_

I am the lawful payee of the above described instrument. I did not receive or I have lost the above referenced check. I am requesting that a stop payment be placed on the above referenced check and a replacement issued. Should I receive or find the above described check in the future, I will return it to the issuer.

Should this check be presented for payment, I agree to fully testify to the above in any court of law and to cooperate with the office of Melissa J. Davey, Standing Chapter 13 Trustee and Fifth Third Bank and any law enforcement officials in any investigation.

The above is true to my knowledge this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_\_.

**\*\*\*IMPORTANT: Please note that checks will only be mailed to the party's address on record with the Bankruptcy Court. If your address has changed, you must file a change of address with the Bankruptcy Court. \*\*\***

Payee Signature: \_\_\_\_\_

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

Phone #: \_\_\_\_\_

State of \_\_\_\_\_

County of \_\_\_\_\_

Sworn to and subscribed before me

This \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_\_

\_\_\_\_\_  
Notary Public