



**EMPLOYEE STOP CHECK FORM**

The undersigned, \_\_\_\_\_, states that he/she resides at \_\_\_\_\_ and that he/she is the payee named on check # \_\_\_\_\_ dated \_\_\_\_\_, in the net amount of \$ \_\_\_\_\_. This above stated check is drawn by Surge Staffing, LLC, on Chase Bank. Above listed check was sent or given to the undersigned/payee on or about \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_ and the check was thereafter lost or stolen and is not now in the possession of the undersigned/payee. The undersigned/payee has not received any of the money directed to be paid to the undersigned/payee by said check. Furthermore, on this statement, the drawer of above stated check agrees to issue a reimbursement check payable to the undersigned/payee net of a \$29.50 reissue charge that has been deducted from the replacement check. Should the undersigned/payee at any time come into possession of said check, he/she will turn said check over to Surge Staffing; that said check be cashed at any time and there is no evidence of any forgery or culpability on the part of some other person or persons, the undersigned/payee, shall reimburse Surge Staffing in an amount equal to the net amount of said check, plus any banking charges incurred by Surge Staffing in connection with said check.

\_\_\_\_\_  
Check Payee Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Check Payee Social Security Number

\_\_\_\_\_  
Surge Staffing Representative

\_\_\_\_\_  
Date