SMBC SUMITOMO MITSUI BANKING CORPORATION

Date_____

The Manager,
The Sumitomo Mitsui Banking Corporation.
Bangkok Branch

Dear Sir,

I/We hereby request you to kindly stop payment for check(s) as under mentioned drawn by me/us on my/our account with you.

I/We agree to hold you harmless for all consequences, which may arise by reason of your refusal to pay check(s) as undermentioned and to be responsible to you for all expenses and costs incurred in connection therewith.

I/We further agree not to hold you liable for failure to execute this request to stop payment, should the check(s) be inadvertently of accidentally paid.

Account No.	Check No.	Date	Amount	In favor of

Reason_____

PLEASE DEBIT FEE FROM ☐ CURRENT A/C _____

☐ SAVING A/C _____

Yours very truly.

_____

Authorized Signature(s) with Company Chop

Remarks: In case of lost check, please provide us a police report with full details of the check such as

- bank name *- customer name* *- account number* *- amount*

- check date *- check number* *- etc.*