

MM	DD	YY

Is the original warrant attached? ___ Yes ___ No

Check one of the following options:

Warrant Cancellation - Agency Complete Section I Only

Warrant Cancellation and Replacement - Agency Complete Section I Only

Initials	Date
Stop Payment: _____	_____
Cancel: _____	_____
Status: _____	_____
Notify: _____	_____
State Auditor's Use Only	

Payee Complete Section II Only

Section I: Agency Request for Replacement Warrant or Warrant Cancellation

Agency Name	Agency Number	Agency Authorized Signature	
Warrant Number	Warrant Date	Warrant Amount	Payee (Vendor) Number
Payee Name		Payee Address	
City	State	Zip	

Reason For Request: _____

Section II: Affidavit of Loss of a Warrant Issued by the State of Wyoming

Having been first duly sworn, the undersigned: _____
Payee on Warrant
of _____
Street City State Zip

hereby deposes and says:
The above described warrant was issued in payment of the stated sum, which was and remains lawfully due and payable to affiant. Said warrant has not been presented for payment by the affiant for the reason that (check appropriate boxes):

- It was never received by the affiant.
- It was lost after receipt by the affiant.
- Other (explain): _____

Should this warrant be cashed by anyone who has forged my signature, I will cooperate with the recovery of the money and the prosecution of the person who cashed it.

Affiant requests a replacement warrant be issued and that any authorization for payment of the original warrant be cancelled. Further, affiant agrees to immediately deliver the above described warrant to the State Auditor if it should ever come into the affiant's possession.

Affiant understands that a false statement made by affiant in this affidavit may be grounds for prosecution under W.S. 6-5-303 or any other appropriate Wyoming Statute.

X _____
Affiant's Signature

Subscribed and sworn before me this _____ day of _____, 20 _____

Notary Public