

## VOID WARRANT AGREEMENT

**Current Date:** \_\_\_\_\_

**District Name:** \_\_\_\_\_

**Fund Name and Fund Number:** \_\_\_\_\_

Please void the following warrant(s):

DATE OF ISSUE	MICR NUMBER	WARRANT NUMBER	DOLLAR AMOUNT	PAYEE	REASON*
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____

\*REASON CODES:      1 – Issued for wrong amount.  
                          2 – Issued to wrong payee.  
                          3 – Lost (attach original Application for Duplicate Instrument form)  
                          4 – Other (Please specify under reason above)

This request is authorized by: \_\_\_\_\_

(Authorized Signature and Title)

Please attach the warrant(s) being voided or the appropriate documentation. Return this document with original authorized signatures to the Yakima County Treasurer's Office and keep a copy for your file.

FOR TREASURER'S USE ONLY:	STAFF: _____	SR: _____
	DATE: _____	VOIDED IN BANK: [ ] INITIALS