

## Replacement Check Request Form

To: Northfield Park Associates, LLC  
10705 Northfield Rd  
Northfield, OH 44067-1236

I \_\_\_\_\_ request a replacement check for a lost/misplaced  
check number \_\_\_\_\_ dated \_\_\_\_\_ payable to \_\_\_\_\_  
in the amount of \_\_\_\_\_.

If check number \_\_\_\_\_ is found, I will **VOID** it and return it to the  
accounting department of Northfield Park Associates and will not attempt to cash  
said check. I also understand a **\$40.00** stop-payment fee (charged by Dollar Bank)  
for the lost/misplaced check will be deducted from the reissued check.

Signature \_\_\_\_\_ Date \_\_\_\_\_  
Phone Number \_\_\_\_\_  
Email Address \_\_\_\_\_  
Street Address \_\_\_\_\_  
City, State, Zip Code \_\_\_\_\_  
USTA Number \_\_\_\_\_

**\*Please sign, date and return this request to Northfield Park by mail to  
10705 Northfield Rd, Northfield, OH 44067 Attn: Horsemen's Bookkeeper,  
or by fax to 330-468-0951, by hand to the racing office or by email :  
NFP-PurseRequest@northfieldparkracino.com**

**Northfield Park will not stop-pay and reissue checks without this request.**