



COUNTY OF TULARE AFFIDAVIT

Claimant

declares under penalty of perjury:

1. The undersigned is the Payee of the following County warrant(s).

Warrant Number	Warrant Date	Payee	Amount
_____	_____	_____	_____

2. Payee believes that warrant was

(Not received, stale-dated, lost, stolen, destroyed, or forged)

3. Payee understands that he/she cannot cash this missing warrant if it comes into his/her possession. If it does, he/she agrees to immediately return it to the COUNTY OF TULARE.

4. Payee has never endorsed the warrant(s), and has neither directly or indirectly received any part of the proceeds of the warrant(s). No part of the proceeds of the warrant(s) has been applied to any use or purpose on Payee's behalf.

Payee Name (Typed or Printed)

Payee Signature

Address

City, State, Zip Code

NOTARY ACKNOWLEDGMENT

A notary public or other officer completing this certificate verifies only the identity of the individual who signed the document to which this certificate is attached, and not the truthfulness, accuracy, or validity of that document.

State of California _____)
County of _____)
On _____)
Date _____)
before me, _____ ,)
Notary Public _____)
personally appeared _____ ,)
Name(s) of Signer(s) _____)

who proved to me on the basis of satisfactory evidence to be the person(s) whose name(s) is/are subscribed to the within instrument and acknowledged to me that he/she/they executed the same in his/her/their authorized capacity(ies), and by his/her/their signature(s) on the instrument the person(s), or the entity upon behalf of which the person(s) acted, executed the instrument.

I certify under PENALTY OF PERJURY under the laws of the State of California that the foregoing paragraph is true and correct.

WITNESS my hand and official seal.

Signature (seal) of Notary Public

**IF WARRANT IS MORE THAN \$1,000
AFFIDAVIT MUST BE NOTARIZED
OR
PAYEE MUST PROVIDE PROOF
OF IDENTIFICATION IN PERSON**

RETURN AFFIDAVIT TO:
TULARE COUNTY AUDITOR CONTROLLER
CLAIMS DIVISION
221 S MOONEY BLVD ROOM 101 E
VISALIA CA 93291-4593

AUDITOR'S USE ONLY

Replaced by Warrant # _____
AUD -189 (01/15)

Initials: _____

Dated: _____