

INDEPENDENT SCHOOL DISTRICT 196

Rosemount, Minnesota

Educating our students to reach their full potential

Series Number 704.4.2P Adopted August 2005 Revised _____

Title Affidavit of Lost, Destroyed or Stolen Payroll Check

The Undersigned states as follows:

Independent School District 196 Rosemount, Minnesota, issued its original check number _____ in the amount of \$_____, payable to the order of the Undersigned.

EMPLOYEE: Please initial appropriate box.

- [] The original check was lost, mislaid, destroyed, or stolen **after** the Undersigned received it. I make this affidavit to induce the issuance to me of a duplicate check to take the place of the lost, mislaid, destroyed or stolen check. Should said lost, mislaid, destroyed or stolen check, at any time, come into my hands, I will not attempt to cash or deposit said check and will immediately deliver it to the Payroll Department at the District Office.
- [] The original check was reportedly lost, mislaid, destroyed, or stolen **before** the Undersigned received it. I make this affidavit to induce the issuance to me of a duplicate check to take the place of the lost, mislaid, destroyed or stolen check. Should said lost, mislaid, destroyed or stolen check, at any time, come into my hands, I will not attempt to cash or deposit said check and will immediately deliver it to Payroll Department at the District Office.
- [] The original check purports to bear the Undersigned's signature or endorsement, and the Undersigned expressly denies, disaffirms and disavows the signature or endorsement.

Employee name (please print): _____

Employee signature: _____ Date of signature: _____

Street address: _____

City, state, zip code: _____

Employee number: _____ Location: _____

The foregoing was acknowledged before me
this _____ day of _____, 2_____
by _____,
under the laws of Minnesota.

Signature of Notary Public