

AFFIDAVIT OF FORGED OR MISSING ENDORSEMENT PAYEE DECLARATION

(UB Client must complete the Client Declaration found on Page 2.)

State of _____

County of _____

_____ ("Payee") says under penalty of perjury:

1. The undersigned is the Payee of the following check(s) drawn on Account Number _____ at Union Bank, N.A.

Check Number	Amount	Payee	Check Date
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

2. The endorsement on the check(s) was not authorized or written by Payee or the endorsement is missing.

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

For checks payable to more than one person: Payee is entitled to \$ _____ of the total amount of the check(s). State below how much of the proceeds of the check(s) is owed to each other payee, and the basis for each other payee's share: _____

4. Payee believes that _____ (insert name) forged Payee's endorsement and/or received the proceeds of the check(s), under the following circumstances:

5. Payee first became aware of the forgery(ies) on (date) _____

Payee Name (Printed) Address

By: _____
Payee Signature City, State and Zip Code

Subscribed and sworn to (or affirmed) before me on this

_____ day of _____, _____ by
Date Month Year

Name of Signer

Proved to me on the basis of satisfactory evidence to be the person(s) who appeared before me.

Notary's Seal

Signature of Notary Public

BANK USE ONLY	<input type="checkbox"/> Reviewed for SB 1018
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