INDEPENDENT SCHOOL DISTRICT 196 Rosemount-Apple Valley-Eagan Public Schools Educating our students to reach their full potential

Series Number 704.2.5P Adopted August 2005 Revised June 2007

Title Affidavit of Lost, Destroyed or Stolen Accounts Payable 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.

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 Accounts Payable 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 Accounts Payable 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.

Company representative (please print):	
Company representative signature:	Date:
Company name and phone number:	
Street address:	
City, state, zip code:	
The foregoing was acknowledged before me this day of, 2	Office use only: Vendor #:
by, under the laws of Minnesota.	
Signature of Notary Public	