

AFFIDAVIT OF MULTI CHECK COLLECTION

State of:		County of:		
I,_	, make this statement under oath.			
1.	I have examined the draft/check #	drawn on account #	, dated as of	
, payable through Commonwealth Business Bank drawn by (insert name of person				
wri	ting the check), in the sum of \$	Dollars, and payable		

2. I further depose and state that upon examination of the above mentioned check I discovered that the Check was not authorized by me or anyone acting on my behalf. I state that (*select one*):

 \Box Counterfeit – The Unauthorized Check was created without my knowledge, agreement or consent whether implied or otherwise nor did I directly or indirectly authorize any party to issue the Unauthorized Check. I have not received directly or indirectly any benefit, money, goods or services as a result of the Unauthorized Check, and I have not authorized any persons(s) or other entity to receive any benefit, goods, money, or services.

 \Box Forged maker/Drawer (Signature) – The signature on the Unauthorized Check is not mine nor did I authorize anyone to sign, stamp, or otherwise indicate my consent to the issuance of the Unauthorized Check. I have not received directly or indirectly any benefit, money, goods, or services as a result of the Unauthorized Check, and I have not directly or indirectly authorized any person(s) or other entity to receive any benefit, money, goods, or services related thereto.

 \Box Unauthorized Demand Draft – The draft was not initiated at my request, approval or direction nor did I directly or indirectly authorizes any other party to initiate it. I have not received directly or indirectly any benefit, money, goods, or services as a result of the unauthorized draft, and I have not directly or indirectly authorized any person(s) or other entity to receive any benefit, goods, money, or services related thereto.

 \Box Unauthorized Remotely Created Check – The remotely created check was not created at my request, approval or direction, nor did I otherwise indicate my consent to the creation of the remote check in the amount stated on the check and to payee stated on the check.

□ Alteration – The following alteration was made to the Unauthorized Check:

Initial Payee:	Altered to				
Initial Amount \$	Altered to \$	This alterat	tion was not directly or indirectly authorized by		
me nor did I authorize anyon	ne directly or indirectly to alter the	Unauthorized Check.	I have not received directly or indirectly any		
benefit, goods, money, or services as a result of the Unauthorized Check, and I have not received directly or indirectly authorized any					
person(s) or other entity to receive any benefit, goods, services, or money related thereto.					

Forged Endorsement/Missing Endorsement/Not Endorsed as Drawn – I have reviewed the Unauthorized Check and determined that the endorsement on it is not mine nor did I authorize anyone to endorse the check on my behalf. I have not received directly or indirectly any benefit, goods, money, or services as a result of this check, and I have not directly or indirectly authorized any person(s) or other entity to receive any benefit, goods, services, or money related to this check.

If further depose and say that the Unauthorized Check was not originated or issued with fraudulent intent by me or any person acting on my behalf or in concert with me, and that the signature below is my proper signature.

Further, I agree to cooperate in any internal or other investigation and/ or legal action taken with regard to this matter. I authorize the release of information related to the fraud to law enforcement for the purpose of assisting them in the investigation and potential prosecution of the person(s) who committed this fraud. I declare under penalty of perjury that the information I have provide in this affidavit is true and correct to the best of my knowledge.

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.

Subscribed and sworn in my presence by

on this ______ day of _______ in the year ______.

_____ My Commission Expires: ______ Notary Public