

Appendix C – CONSUMER AFFIDAVIT

Use this Affidavit when returning a draft/check that has been in any way listed below. The consumer submitting this Affidavit should select the appropriate box(s) and fill in any additional information as required. **This Affidavit must be SIGNED and NOTARIZED and presented as an ORIGINAL Document. (No photocopies can be accepted)**

STATE OF _____)

COUNTY OF _____)

ss. **CONSUMER AFFIDAVIT OF:**

- Forged Endorsement (Completed by PAYEE)**
- Forged Drawer (MAKER)**
- Altered Amount**
- Altered Payee**
- Lack of Endorsement/Not Endorsed As Drawn**
- Counterfeit Item**

I, _____, being duly sworn, depose and state the following:
(Name of Consumer)

1. That I have examined the attached draft/check, drawn on Account _____, and dated as of _____, with the draft/check number of _____; payable through _____; drawn by _____, in the sum of _____ Dollars (\$ _____); and payable to the following _____.

2. I further state that the following has been discovered on the draft/check:

Forged Endorsement: That the signature as endorser on the above noted draft/check was not made by me nor was it placed upon said draft/check with my knowledge or consent and I have not benefited in any way from the issuance or negotiation of the above draft/check.

Forged Drawer: That the signature appearing as drawer on the above noted draft/check was not made by me nor was it placed upon said draft/check with my knowledge or consent and that I have not benefited in any way from its issuance or negotiation.

Altered Amount: That an alteration in the draft/check noted above was made, thereby changing the amount from \$ _____ to a new and unauthorized amount of \$ _____.

Altered Payee: That the draft/check noted above was altered in that the original Payee of _____ was changed to _____.

Lack of Endorsement/Not Endorsed as Drawn: That the above noted draft/check lacks the proper Endorsement as required or that the above noted draft/check was not endorsed as Drawn.

Counterfeit Item: The item described above is counterfeit.

3. I again further state that I received no benefits, proceeds or consideration from the above draft/check and that any and all alterations, forgeries or counterfeiting as noted above in the attached draft/check occurred without my knowledge or consent.
4. That I understand that this forgery, alteration or counterfeit may be subject to an investigation by my financial institution or its assigns as well as local, state and/or federal law enforcement agencies and that I may be asked to comply with court orders or subpoenas to give testimony as to the facts and statements contained on this affidavit.
5. That I understand that making a false and/or misleading statement as sworn in this affidavit may subject me to various local, state or federal statutes and may be punishable by fines and/or imprisonment.
6. That I currently reside at:

Mailing Street: _____

City: _____ State: _____ Zip: _____

As signed by me on the date below _____

Sworn before me this _____ Day of _____, 20____ .

Notary Public

State of _____

County of _____

My Commission Expires: _____