



Claim Form for Lost, Stolen or Destroyed Cashier's or Teller's Checks

Claim and Request for Payment [/Reimbursement] of a Lost, Stolen or Destroyed Cashier's, Teller's or [Certified Check]

Check and Claimant Information:

Name of Claimant: _____

Party/Person Making Claim

- Remitter
- Payee
- Drawer

Check Type/Type of Check

- Cashier's Check
- Teller's Check
- Certified Check

Account Number of Member that Provided Funds or Purchased Check: _____

- Date of Check #: _____
- Check Number _____
- Name of Payee: _____
- Name of Drawer: _____
- Amount of Check: \$ _____

Declaration of Loss:

By my signature below, I certify and declare under penalty of perjury that I am the claimant [-Declarer] named above; that I am making this claim and declaration of loss as either the remitter or payee of a cashier's or teller's check [or drawer or payee of a certified check] that I had and then lost possession of the check, or never received the check and that the loss of possession was not the result of a transfer by me or a lawful seizure of the check; and that I cannot reasonably obtain possession of the check because the check: (note/mark/check applicable box)

- 1. is lost
- 2. was stolen
- 3. was destroyed.*

Explain circumstances: _____

*If the check has been damaged or mutilated, the credit union, at its option, may require presentation (and surrender) of the damaged or mutilated item.

I assert a claim for/to the amount of the check described above and request payment of that amount by the credit union. **I acknowledge and agree that this claim constitutes a warranty of the truth of all statements made in this claim.**

I acknowledge and agree that this claim is not enforceable unless it is received at a time and in a manner affording the credit union a reasonable time to act on it before the check is paid, and unless I

provide reasonable identification to credit union. Additionally, I understand this claim is not enforceable until the later of 1.) the time that this claim is presented to the credit union, or 2.) the 91st day from the date of the cashier's or teller's check, or the 91st day from certification/acceptance of the cashier's or teller's check I acknowledge that until this claim becomes enforceable it has no legal effect, and the credit union may pay the check to any person entitled to enforce it, in which event, the credit union is discharged from all liability with respect to the check.

I acknowledge that once the claim becomes enforceable, the credit union is no longer obligated to pay the check. I also agree that when the credit union reimburses me for the amount of the check pursuant to this claim, and the check is subsequently presented for payment by a person having the rights of a holder in due course, I am obligated to 1.) Refund the payment to the credit union if the check is paid to that person, or 2.) Pay the amount of the check to the person having the rights of a holder in due course if the check is dishonored and upon dishonor consent to the credit union providing this person with a copy of this claim form.

I understand that I can request the credit union to pay this claim prior to the date that it becomes enforceable, and as a condition of early payment/of any such premature payment, the credit union can require me to complete an affidavit and post a bond or other security in such amount and upon such conditions as the credit union deems appropriate.

By signing this claim and request, I agree to defend, indemnify and hold the credit union harmless from any claim, damage or costs made or incurred as a result of its refusal to pay the check described above.

_____	_____	_____
Claimant's Signature	ID	Date/Time
_____	_____	_____
Social Security #	Home Phone	Work Phone

Subscribed and sworn to before me this _____ day of _____, _____.

Notary Public for the State of:
Residing at:
My commission expires: _____

For Credit Union Use Only: Notice to Payor-Drawee of Teller's Check

Fax to Payor-Drawee () _____

Notice of Potential Forged Endorsement

Date to Refuse Payment ____/____/____