

**AFFIDAVIT OF FORGERY
(Checks)**

STATE OF MINNESOTA }
 } ss.
COUNTY OF HENNEPIN }

I, _____, being duly sworn on oath, state as follows:

- (1) that I am at least 18 years old;
- (2) that I have examined the check or deposit/withdrawal ticket ("ITEM") described below;
and
- (3) that payment of the item was not authorized by me because:
 - forged or unauthorized maker or drawer signature.
 - forged or unauthorized endorsement.
 - altered amount or payee.
 - unauthorized withdrawal.

Check/Ticket Number	Dated	Amount
Drawn On		Account #
To The Order Of		
Maker or Drawer		
Endorsed by		
Altered From		
Altered To		

I also state as follows:

- (1) that I have not signed or altered the item referred to above, and that I have not authorized my signature on the item or alteration of the item;
- (2) that I have received no payment or benefit (directly or indirectly) as a result of the payment of the item referred to above;
- (3) that I will provide any information I have as to the person who is responsible for signing my name on the item or altering the item; and
- (4) that all my statements above are true and that I will cooperate fully in the investigation and prosecution of this matter.

Subscribed and sworn to before me this _____ day of _____, 20____. Signature

Address

Notary Public

Telephone

