

Affidavit for a Lost Cheque

Note

I _____
Last Name First Name

of _____
Unit Number Street Number Street Name

City Province Postal Code

Student ID

I certify that I _____ have not received, or have received and subsequently lost cheque number _____ dated _____ 20 ____.

For the sum of _____ \$ _____
(enter the sum in words) (enter the sum in figures)

I further certify that I have not received payment of such amount by any other means.

In the event of a duplicate cheque being issued made payable to me, I agree not to cash, endorse, or transfer the original cheque should it ever come into my possession, but to return the same to KPU.

I further agree that if KPU suffer any loss whatsoever by reason of the issue of a duplicate cheque, I shall indemnify myself against all costs, damages, interest and expenses which one may bear or incur as a result of any claims being made by me or my assignees, endorsees or transferees where such claim is made on the original cheque or the duplicate cheque, and I hereby authorize KPU to withhold the amount of such loss for any future payment due by me.

According to the best of my knowledge, information and belief, this cheque has not been cashed nor has same been deposited to any of my accounts.

Claimant's Signature Date (YYYY/MM/DD)

Witness (Print Full Name)
(Witness must be 18 years or older) Date (YYYY/MM/DD)