

**TULARE COUNTY EMPLOYEES' RETIREMENT ASSOCIATION (TCERA)  
AFFIDAVIT OF LOST, DESTROYED, STOLEN, FORGED, OR STALE-DATED WARRANT**

STATE OF CALIFORNIA  
COUNTY OF TULARE

Member Number \_\_\_\_\_

\_\_\_\_\_ (“Payee”) declares under penalty of perjury:

1. The undersigned is the Payee of the following TCERA/Tulare County Warrant(s) drawn on Account #7020023958 at Union Bank of California, N.A.:

<u>Warrant Number</u>	<u>Amount</u>	<u>Payee</u>	<u>Warrant Date</u>
_____	\$ _____	_____	_____
_____	\$ _____	_____	_____

2. Any endorsement on the warrant(s) was not authorized or written by Payee or the endorsement is missing.

3. Payee believes that the warrant was \_\_\_\_\_  
(Not received, lost, stolen, forged, stale-dated, etc.)

4. Payee has never ratified any endorsement of the warrant(s), and has neither directly nor indirectly received any part of the proceeds of the warrant(s). No part of the proceeds of the warrant(s) has been applied to any use or purpose on Payee's behalf.

5. Payee believes that \_\_\_\_\_ (insert name) forged Payee's endorsement and/or received the proceeds of the warrant(s) under the following circumstances (Complete for forgeries only):  
\_\_\_\_\_  
\_\_\_\_\_

6. Payee first became aware of the loss, forgery, etc. on \_\_\_\_\_ (date).

7. Payee will not cash, endorse, or otherwise attempt to negotiate the referenced warrant(s). If payee has or comes into possession of the above referenced warrant(s), Payee agrees to immediately return it to:

**TCERA, 136 N. Akers Street, Visalia, California 93291**

Payee Signature \_\_\_\_\_ Date \_\_\_\_\_

Payee Name (Printed) \_\_\_\_\_

Payee Address \_\_\_\_\_

Subscribed and Sworn to before me on \_\_\_\_\_, \_\_\_\_\_ (Date)

Witness or Notary (Signature) \_\_\_\_\_

*Note: Notarization is required for Forgery Claims  
All other claims require a Witness signature only.*

**Office Use Only**

Replaced by Warrant # \_\_\_\_\_ Dated \_\_\_\_\_ By \_\_\_\_\_