



Affidavit of Forgery or Altered Item

I, _____ residing at _____

in the City of _____ County of _____ and the State/Commonwealth of _____

_____ have examined the following check/withdrawal/draft:

Account Number _____ Account Name _____

Check # _____ Dated _____ Amount \$ _____

And hereby state the following:

FORGED SIGNATURE/UNAUTHORIZED DRAFT: That I am the authorized signer of said check/withdrawal/draft and I never signed nor authorized any person to sign my name or debit my account on said check/withdrawal/draft. The signature/authorization appearing thereon was made without my knowledge or consent. I never received any of the proceeds thereof or benefited in any way directly or indirectly from the proceeds.

COUNTERFEIT ITEM: That I am the authorized signer of said check/withdrawal/draft and I never signed nor authorized any person to sign my name on said check/withdrawal/draft. The signature appearing thereon was made without my knowledge or consent. I never received any of the proceeds thereof or benefited in any way directly or indirectly from the proceeds.

ALTERATION: That the _____ (Amount /Date/Payee) on the item has been altered from _____ to _____.

FORGED ENDORSEMENT: That I am the person named as the payee of said check/withdrawal/draft and I never signed nor authorized any person to sign my name on said check/withdrawal/draft. The signature appearing thereon was made without my knowledge or consent. I never received any of the proceeds thereof or benefited in any way directly or indirectly from the proceeds.

MISSING/IMPROPER ENDORSEMENT: That I am the person named as the payee of said check/withdrawal/draft and I never received any of the proceeds thereof or benefited in any way directly or indirectly from the proceeds.

I offer the following explanation concerning the negotiation of this instrument. (if none state 'none').

I agree to assist Wachovia Bank, and appropriate law enforcement authorities in any investigation and if needed, be a witness in any hearing, proceeding or action brought against the person(s) responsible for the forgery. I have accurately and fully reported to the Bank all the information, knowledge, or facts that I possess concerning the forgery and should anything else concerning the forgery come to my attention, I will immediately report same to the Bank.

This affidavit is made voluntarily and for the purpose for establishing the claim of forgery.

_____ Sworn to and subscribed before me this _____

Claimant (title of business account) _____

Home Phone _____ Business Phone _____ Day of _____, _____

Date _____ Notary Public _____

Identification: _____ My Commission Expires: _____

Wachovia Bank and Wachovia Bank of Delaware are divisions of Wells Fargo Bank, N.A.

State of _____ }
County of _____ }

AFFIDAVIT OF FORGERY

_____, residing at the address given below, being duly sworn on oath deposes and states that I am of legal age, and that the check or draft described below has been examined and the items are disputed on the grounds of:

- Forged or Unauthorized Endorsement (Signature appearing on back of check)
- Forged or Unauthorized Signer (Maker's signature appearing on face of check)
- Altered Amount / Payee / Date

Check / Draft Number _____ Issued Date _____ Paid Date _____

Amount _____ Batch Track Number _____

Drawn on _____

To the Order of _____

Maker or Drawer _____

Endorsed by _____

Altered from _____

Altered to _____

The undersigned denies having signed or endorsed or altered such check(s) / draft(s) previously, nor have I authorized or procured the signature endorsement or alteration of said item(s). I further warrant that no proceeds or benefits from the payment / negotiation of the item(s) were received directly or indirectly by the undersigned. By my signature below, I attest to the truthfulness of my statements above and agree, if requested, to assist or testify on the Bank's behalf in the resolution / prosecution of this matter.

Signature: _____

Printed Name: _____
(Include title, if company or corporation)

Address: _____

Subscribed and Sworn to Before Me

This _____ Day of _____, 19 _____
