Boulder County

Office of Financial Management

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Mailing Address: P.O. Box 471 • Boulder, CO 80306 • www.BoulderCounty.gov

AFFIDAVIT FOR REPLACEMENT OF LOST WARRANT (CHECK)

All fields are required. Incomplete forms may result in delayed processing.

Affiant's Information

Affiant's Full Legal Name: _____

Organization or Business Name (if applicable): _____

Remittance Address

Street address: _____

City: _____ State: _____

Zip code: _____ Phone: _____

Affiant's Sworn Statement

I, _____ (the Affiant), having sworn (or attested) upon oath, state as follows:

1. Having reviewed the above Affiant's Information, I hereby incorporate it into this Sworn Statement and represent that it truly and accurately reflects my information.

2. A Boulder County warrant issued to me was not received or was lost.

   a. I am the true owner and custodian of the warrant, or the organization that is the true owner and custodian of the warrant has authorized me to act on its behalf.

   b. I have not transferred or cashed said warrant, and I am legally entitled to its possession.

Warrant Description

3. The warrant is described as follows:

Check Number: _____ Date: _____

Amount: _____ Payee: _____

Claire Levy *County Commissioner* **Marta Loachamin** *County Commissioner* **Ashley Stolzmann** *County Commissioner*

4. I hereby request that Boulder County issue a replacement warrant in lieu of the original warrant.

5. I agree to notify the Boulder County Office of Financial Management immediately upon receipt or recovery of the original warrant. If after issuance of a replacement warrant I receive or recover the original, I agree to immediately return the original warrant to the Boulder County Office Financial Management.

6. I understand that making a materially false statement which I do not believe to be true under oath with an intent to mislead a public servant in the performance of their duty constitutes perjury in the second degree and is punishable by law, including fines of up to $1,000 and imprisonment of up to twelve months.
Refer to **C.R.S. § 18-8-503**.

Signature

Boulder County reserves the right to request notarization of this document if deemed necessary.

Affiant's Signature: _____

Date: _____