A F F I D A V I T (Corporations)

As an officer of _____, Payee of check numbered _____, dated

_____, 20_____, and issued by the County of Orange Auditor-Controller's Office on the Accounts Payable or Trust

Fund in the amount of $_____ dollars, hereby declare and certify that said check has been undelivered, lost or

destroyed, and further that we did not cash said check, cause said check to be cashed or receive proceeds therefrom.

We also declare and certify that any endorsement that may now appear on said check was not made by us or under our direction,

nor made by any second party with whom we have a joint tenancy agreement, and further that we are the rightful payee and have

first-hand knowledge of the truth of the facts contained therein for this check which was issued in payment for

(Invoice #, Case #, Parcel #, etc.) _____.

Our address at the date the check was issued was: _____

_____

_____

We certify (or declare) under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

Executed this _____ day of _____, 20_____.

Address if different from above:

_____   _____

Signature and Title (Chairman of Board, President, VP)*   _____

_____   _____

Signature and Title (Secretary, Assistant Secretary,

Chief Financial Officer, Assistant Treasurer)*   _____

Telephone Number

*California Corporations Code Section 313 provides that signatures from individual(s) from **EACH** of the above categories are

required in order to bind the corporation.

A notary public or other officer completing this certificate verifies only the identity of the individual who signed the document to
which this certificate is attached, and not the truthfulness, accuracy, or validity of that document.

STATE _____

COUNTY OF _____

NOTARIZATION

On this _____ day of _____, 20_____, before me, _____ (insert name and title of the officer),

personally   appeared   _____(insert   name(s)   and

quality of the officer, if applicable), who proved to me on the basis of satisfactory evidence to be the person(s) whose name(s)

is/are subscribed to the within instrument and acknowledged to me that they executed the same in their authorized capacity(ies),

on behalf of the person(s)/entity therein named and acknowledged to me that the person(s)/entity acted, executed the instrument.

I certify under penalty of perjury under the laws of the State of California that the foregoing paragraph is true and correct.

Witness my hand and official seal.

Signature _____   (Seal)

(Corporation)   *Form updated 10/28/19*