AFFIDAVIT TO SECURE COUNTY WARRANT

Declaration of Loss or Destruction of Original County Warrant (Govt. Code Secs. 29850-29854 and Code of Civil Procedure Sec. 2015.5)

I, ______ hereby declare that I am the legal owner or custodian of

County Warrant No. ______ issued by the County Auditor of the County of Kern, State of

California, on the County Treasury of said County in the amount of **\$** Dated and

the name of the payee shown is _____.

Indicate below what happened - Mark on the box and explain:

- [] The above warrant was not received.
- [] The above warrant was destroyed ______
- [] The above warrant was lost by me on at
- [] Other:

INSTRUCTIONS 1. Complete the form.

3. Mail this affidavit to:

Passport.

in person.

To (date)____

By_

2. Sign your name and indicate your address.

Kern County Auditor-Controller

5. If the original warrant is found, return to the

AUDITOR-CONTROLLER TO COMPLETE

Deputy

Bank listing and daily bank records checked

Acceptable: Driver s License or DMV

NOT Acceptable: Welfare Medical ID card.

ID card; signed Social Security Card;

1115 Truxtun Avenue

Bakersfield, CA 93301

Auditor-Controller immediately.

DECLARATION

I hereby declare under penalty of perjury that the foregoing is true and correct, and that I have not presented this warrant for payment.

Executed at		California, this	dav of	20	
LACCULCU at_	,		uay or	, 20	_•

Signature

Phone Number

Address

City

State Zip

4. Identification required if affidavit is presented FORM FOR SIGNATURE BY MARK (X)

If signature is made by mark (X), it must be witnessed by one person who can write. Use form below. (His) or (Her) []

Mark

WITNESS TO COMPLETE

(Payee \Box s name must be written on this line exactly as it appears as shown above)

Signature of Witness

Address of Witness

KC Aud-Cont. # 20 (Rev. 3-99)

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