

LOST CHECK AFFIDAVIT (FORM 510)

**THE STATE OF TEXAS
COUNTY OF GALVESTON**



I, _____, being first duly sworn, do depose and say that I am the entity named as the payee of the check numbered _____, drawn by the Treasurer of the County of Galveston on _____ for the sum of \$_____.

Being still sworn, I further say that the above-described check has not been received or negotiated by me. The above-described check has been _____ (lost, stolen, destroyed, etc.), and, by this affidavit, I am requesting that the County of Galveston place a stop payment on the above-described check, and issue a replacement check.

I understand that under no circumstances should I present the above-described check for payment if it should come into my possession after the filing of this affidavit, and I hereby indemnify and hold harmless the County of Galveston from any liability, loss, expense, or damage which may occur as a result of the issuance of the original check and/or the replacement check.

Affiant's Signature _____

Contact Number for Affiant _____

Sworn to and subscribed before me this _____ day of _____, 20_____.

Notary Public in and for

County, Texas.

My Commission expires

Return **ORIGINAL NOTARIZED FORM** to:

Galveston County Treasurer's Office
Attn: Kristi Kolaja
722 Moody 4th Floor
Galveston, Tx 77550

For questions, contact:

Kristi Kolaja
(409) 770-5389
Kristi.Kolaja@co.galveston.tx.us