

IN THE CIRCUIT COURT OF COOK COUNTY, ILLINOIS

STATE OF ILLINOIS }
COUNTY OF COOK } ss:

AFFIDAVIT OF LOST, MISSING OR STOLEN CHECK
(COOK COUNTY CHECKS)

CASE NUMBER(S) SOCIAL SECURITY NO.

I, (Name of person making affidavit), being first duly sworn on oath, state the following:

- 1. I am the Petitioner in the above mentioned case number(s) filed in the Circuit Court of Cook County.
2. I reside at
3. My telephone number daytime evening
4. I receive child support through the State Disbursement Unit pursuant to an Order for Support.
5. Checks were issued by Mariyana T. Spyropoulos, Clerk of the Circuit Court of Cook County, which are identified below :
Check No. Date Amount \$
Check No. Date Amount \$
Check No. Date Amount \$
Check No. Date Amount \$
Check No. Date Amount \$

6. That the above checks have been lost misplaced missing destroyed stolen other (describe)

7. By this affidavit, I am requesting that Clerk of the Circuit Court of Cook County, place stop payment(s) on the check(s) listed above and issue a replacement check. I further understand that under circumstances should I present any of the checks listed for payment if they should come into my possession after the filing of this affidavit.

8. I further understand that by presentation of this affidavit and the issuance of a replacement check by the Clerk of the Circuit Court of Cook County, that I can be held legally liable both under criminal and civil laws of the State of Illinois if I should attempt to cash or present any of the checks listed above to any bank, financial institution, currency exchange or other third party,

Signature of Client

Signed and sworn to before me on this day of

Notary Public

(THIS FORM MAY BE FAXED TO 312-345-4146 OR MAILED TO 28 N. CLARK, ROOM 200, CHICAGO, IL 60602)

FORM MUST BE NOTARIZED