



Affidavit Addendum for Forged Endorsement Claims

This addendum to the *Affidavit of Forgery or Fraudulent Use* form should be completed by the payee.

- Fill out a separate form for each check involved in the forged endorsement claim.

Step 1. Check information

Payee Name (your name and business name, if applicable)				
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Check Number	Check Date	Amount	Claim Number (if known)	Today's Date

Maker Name (person who signed the check)	Endorsed By (name signed on the back, if legible)

Step 2. Payee declarations

As the payee, you are making the following declarations:

- The endorsement on the reverse side of the check listed above is a forgery, missing, or not as originally drawn. I did not endorse the check, and I did not authorize the endorsement.
- I did not receive any benefit or value from the proceeds of the check listed above.
- I have not arranged with the person(s) who misused the check listed above to be reimbursed for any portion of the proceeds of the check.
- I will cooperate in any investigation, promptly disclose any information requested by BECU, and if necessary, cooperate fully with any prosecution.
- I will testify to the truth of these statements in any case that may result from the affidavit. All information I have provided in this document is true.

Step 3. Acknowledgment and Consent

By signing below, I certify that I have read, understand, and agree with the above declarations. Further, I personally verified and confirmed that all information provided and displayed in this form is accurate, complete, true, and submitted for the purpose selected above. I understand that BECU will rely on such information in BECU's dealings with me.

Signature	Printed Name	Date (MM/DD/YYYY)



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Step 4. Notary public

State of Washington, County of	Sworn before me on	Notary Seal
Name of Notary		
Residing at		
Notary Public Signature	My Commission Expires	

Step 4. Return form to BECU

Return the completed, signed, and notarized form to any BECU location in person, by fax, or by mail to:

BECU
Deposit and Payment Processing
M/S 1085-2
PO Box 97050
Seattle, WA 98124-9750
Fax: (206) 805-5637