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Claim to Lost, Stolen or Destroyed Cashier's Check

I, _____, (print or type name of claimant) hereby assert a claim to the following described cashier's check:

Remitter: _____

Payee: _____

Date: _____

Amount: _____

Check number: _____

Account number: _____

(a copy of the remitters copy may be attached)

And request payment of the amount of the check. My Declaration of Loss is attached hereto. I understand that the claim has no legal effect until it is enforceable. A claim becomes enforceable at the LATER of

1. The time the claim is asserted; or
2. The Ninetieth (90) day following the date of the check.

I further understand that my claim may be enforceable if the Declaration of Loss fails to meet the requirements of Section 3-312 of the Uniform Commercial Code or if it fails to reach the Credit Union at a time and manner which afford the Credit Union reasonable time to act on it before the check is paid.

I agree to provide reasonable identification if so, requested by the Credit Union.

Signature of Claimant: _____

Date: _____

