



**Illinois State Treasurer's Office  
Attn: Warrant Division/Forgery Section  
1 East Old State Capitol Plaza  
Springfield, IL 62701  
Phone: (217) 782-4117  
Fax: (217) 558-4028**

**FORGED WARRANT AFFIDAVIT**

\_\_\_\_\_, swears on oath and affirms that:

I am the payee named in the warrant(s) drawn by the State of Illinois Comptroller and drawn on the State of Illinois Treasurer. I have examined the signature in my name that appears on the back of the warrant(s). I did not make the indorsement on the warrant(s) and did not authorize another to make it. I did not receive any benefit from the warrant(s) that totaled \$\_\_\_\_\_ or authorize another person to benefit on my behalf from the warrant(s) that are listed below or attached hereto.

Date warrant issued \_\_\_\_\_ Warrant # \_\_\_\_\_

**(If more than one warrant is involved, use additional paper to list the number and amount of each warrant.)**

**CERTIFICATION**

I certify to the best of my knowledge that the foregoing statements and the information I provided in my claim form are true. I understand that a false statement in this affidavit will subject me to penalties for perjury under Illinois law for making false sworn statements (5 ILCS 255/5). Perjury is a Class 3 felony (720 ILCS 5/32-2).

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Social Security Number/Tax ID Number

**TO BE COMPLETED BY NOTARY PUBLIC WITH SIGNATURE AND SEAL**

Signed and sworn to before me

this \_\_\_\_\_ day of \_\_\_\_\_ 20\_\_\_\_\_.

\_\_\_\_\_  
Notary Public