



CITY OF CHICAGO DEPARTMENT OF FINANCE
UNCLAIMED WARRANT AFFIDAVIT (Business)

Warrant number: _____ Warrant Date: _____

Amount: _____ Invoice Number: _____

Payee: _____

Payment Reason: _____

1. I, _____ (print name), being duly sworn, am an authorized representative of the above-referenced payee,¹ and do state that the City of Chicago issued the above-referenced warrant and the warrant was:

not received or lost (check one).

2. I have personal knowledge of the payee's accounts receivables and the payee did not cash the above-referenced warrant or request payment on a subsequent invoice nor has the City of Chicago reissued payment to the payee on any subsequent warrant, so the amount identified above currently remains unpaid.

3. If the payee locates the above-referenced warrant, the payee will immediately return it to the City of Chicago Department of Finance at the address below.

4. If the payee owes any money to the City of Chicago, the City of Chicago will first apply the amount of the above-referenced warrant to the amount the payee currently owes to the City of Chicago as an offset. Any remaining balance will be reissued to the payee.

5. The payee hereby agrees to indemnify and hold harmless the City of Chicago from any loss, liability, expense or damage which it may sustain as a result of the reissuance of the above-referenced warrant.

6. I acknowledge that, under the Municipal Code of Chicago, "[a]ny person who knowingly makes a false statement of material fact to the city in violation of any statute, ordinance or regulation, or who knowingly makes a false statement of material fact to the city in connection with any application, report, affidavit, oath, or attestation, including a statement of material fact made in connection with a bid, proposal, contract or economic disclosure statement or affidavit, is liable to the city for a civil penalty of not less than \$500.00 and not more than \$1,000.00, plus

¹ An "authorized representative" of a business may include the owner, member, manager, partner, attorney, executive officer, accounts receivable representative or any other person employed by the business with authority and personal knowledge of the business.



up to three times the amount of damages which the city sustains because of the person's violation of this section. A person who violates this section shall also be liable for the city's litigation and collection costs and attorney's fees. The penalties imposed by this section shall be in addition to any other penalty provided for in the municipal code." Municipal Code of Chicago §1-21-010(a)(2009).

7. I certify under penalty of perjury that the foregoing is true and correct and that I have authority to act on behalf of the payee to reissue payment for the above-referenced warrant.

Signature

Date

Print Name

Title

Payee Address

Personally appeared before me the said individual and affirmed the above-stated facts as true and correct based upon his/her own personal knowledge.

County _____ State _____

Subscribed and sworn before me this _____ day of _____, 20 _____.

Notary Public

My commission expires: _____

MAIL AFFIDAVIT TO:

**City of Chicago Department of Finance
ATTN: Uncashed Checks Division
121 N. LaSalle St., Room 700
Chicago, IL 60602**