



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

Warrant number: _____ Warrant Date: _____

Amount: _____ Invoice Number: _____

Payee: _____

Description of Payment Reason for Original Warrant: _____

1. I, _____ (print name), being duly sworn, do state that the City of Chicago issued the above-referenced warrant and the warrant was: not received or lost (check one).

2. I did not cash the above-referenced warrant nor has the City of Chicago reissued payment to me on any subsequent warrant, so the amount identified above currently remains unpaid.

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

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

5. I hereby agree 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 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.

Signature

Date

Print Name

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**