

TO RELEASE REPLACEMENT CHECK FOR UNCASHED CHILD SUPPORT CHECK

CASE NUMBER _____

State of Illinois)
) SS
County of Will)

AFFIDAVIT

I, _____ ON OATH DEPOSES AND SAYS THAT HE/SHE IS ENTITLED TO A REPLACEMENT CHECK, IN THE AMOUNT OF \$_____, ISSUED BY THE WILL COUNTY CIRCUIT CLERK. THIS AFFIANT STATES THAT THE ORIGINAL CHECK WAS MISPLACED OR LOST. THIS AFFIANT ALSO AFFIRMS THAT HE/SHE WILL NOT CASH THE ORIGINAL CHECK NUMBERED _____ AFTER DEPOSIT OF THE REPLACEMENT CHECK AND, IF FOUND, WILL RETURN SAID CHECK TO THE WILL COUNTY CIRCUIT CLERK.

(Affiant Name)

(Address)

(City, State, Zip Code)

(Phone Number)

(Signature of Affiant)

SUBSCRIBED AND SWORN
TO BEFORE ME THIS _____ DAY
OF _____, 20_____

(Notary Public)

A COPY OF THIS AFFIDAVIT WILL BE PLACED ON FILE IN THE OFFICE OF THE WILL COUNTY STATE'S ATTORNEY.