



Affidavit of Forged Endorsement

(Please send completed form to Payroll, Thompson University Center)

Employee Declaration:

I _____
First Name Last Name

of _____
Street Address

_____ being duly sworn,
City State Zip Code

depose and say, that the endorsement of a certain UO check No. _____
dated _____ in my favor for \$ _____ issued by the University of Oregon
was not authorized or written by me, the affiant, and that such endorsement of said check is a forgery. I also
say that I have no knowledge of the identity of the person who executed said endorsement. I further state that
no part of the money so paid by the bank was received by me, directly or indirectly, and that no part of said
money was applied to any use or purpose in my behalf.

Signature of Affiant

Subscribed and sworn to before me on _____
Date

Notary Public for the State of Oregon

(SEAL)

My Commssion Expires on _____
Date

Payroll Office Use:

Authorization:

	Name	Signature	Phone	Date
Payroll Officer				