AUDITOR AL	Christopher A. Galloway Lake County Auditor		Lake County Administration Center 105 Main Street • P.O. Box 490 Painesville, Ohio 44077-0490
COUNTY ON		in joine.gov	440.350.2532 440.428.4348 440.918.2500 <i>Fax</i> 440.350.2667
State of Ohio )	SS		
County of Lake )	AF	FIDAVIT	
L	of		
· <u> </u>	(full name)		ailing address)
		, being first duly	sworn, deposes and says that:
1. I am claiming a	check from the <u>Clerk of C</u>	<u>ourts</u> of Lake County.	
2. That on(date)	_, I was entitled to receive	e a county warrant in the	amount of \$ (amount)
3. That said warra	nt was not received by me	because	
	(describe rea	ason(s) warrant was not rec	eived)
4. The Clerk of Cor	urts paid the unclaimed ch	neck into the Lake Count	y Auditor's office on
(date)	(please call Lake Cou	unty Clerk of Courts for a	date of payin)
Further, Affiant say	eth naught.		
		(sigr	nature)
SWORN TO BEFO	RE ME, and subscribed in m	y presence on theday	of,
		(notary	y public)
*Unclaimed Funds ar	e paid into County General F	•	
	Auditor's	Office Use Only	
	Verification <u>Action Taken</u>		
	nber	Voided Warrant Paid into General Fun	
Original Is	sue Date	raiu into General Fun	u 185 / NO

REVISED 09/20/19