AFFIDAVIT FOR RECEIPT OF UNCLAIMED FUNDS FROM THE FAIRFIELD COUNTY TREASURER

State of)	
County of _) SS:)	
l,	, be	ing first duly sworn, state as follows:
1.	I am an agent of	
	(cor	npany name)
	authorized to make this affidavit and receive these funds.	
2.	My contact information is as follows:	
	(title)	
	(telephone num	ber)
	(address number and	d street)
	(city), (state) (z	ip)
3.		is a(n)
	(company name)	. ,
	(type of entity)	organized under the laws
	of the state of	
	(state of organization)	
4.	(company name)	's current address is:
	(number and str	reet)
	(city), (state) (z	ip)
5.	Fairfield County Auditor's warrant no.	was issued to

(warrant no.)

		on
	(company name)	(warrant date)
6.	Said warrant was not cashed, and the si	um of \$ is due to
		for said uncashed warran
	(company name)	
FURTHER AF	FIANT SAYETH NAUGHT.	
		(signature)
		(date)
3efore me ap	ppeared the above named person who un	der oath or by affirmation did sign thi
affidavit this	day of	·