



Readychex Lost/Stolen Check Affidavit

State of: \_\_\_\_\_ Last four digits of employee SSN \_\_\_\_\_

County of: \_\_\_\_\_

\_\_\_\_\_, being duly sworn, deposes and says:  
(Employee/Affiant's Name)

I hereby acknowledge receipt of payroll check number \_\_\_\_\_,  
dated \_\_\_\_/\_\_\_\_/\_\_\_\_, in the amount of \_\_\_\_\_, payable to the order of  
the undersigned.

I further acknowledge and affirm that the said check has been \_\_\_\_\_ (lost, stolen,  
destroyed, etc.) and has never been cashed or otherwise negotiated in anyway by the undersigned or by  
any agent on my behalf.

I acknowledge that, in reliance upon my representations herein, I will be issued a replacement  
check in the place and stead of the above-described check and I agree to return the above-  
described check if it should ultimately be found or discovered.

I further acknowledge that I may be subject to civil and criminal penalties (including criminal  
prosecution for fraud and perjury) if it is ultimately discovered that I have cashed or otherwise  
negotiated (or allowed to be negotiated) the above-described check.

\_\_\_\_\_  
(Employee/Affiant's Signature)

\_\_\_\_\_  
(Print Employer's Name)

\_\_\_\_\_  
(Print Employee/Affiant's Name)

\_\_\_\_\_  
(Print Company Name)

\_\_\_\_\_  
(Print Employer/Affiant's Address)

State of: \_\_\_\_\_  
County of: \_\_\_\_\_  
Sworn to before me this \_\_\_\_\_ day of  
\_\_\_\_\_, 20\_\_\_\_  
(MONTH) (YEAR)  
\_\_\_\_\_  
Notary Public \_\_\_\_\_  
My Commission Expires: \_\_\_\_ / \_\_\_\_ / \_\_\_\_

**Paychex Use Only**  
Office/Client #: \_\_\_\_\_ / \_\_\_\_\_  
Client Name: \_\_\_\_\_