

Affidavit and Indemnity Bond

State of North Carolina, County of _____.

_____, being first duly sworn, deposes and says that warrant(s) numbered _____ for _____ dollars, date _____, allegedly issued by The Office of the State Controller, an agency of the State of North Carolina and drawn on the State Treasurer, and allegedly made payable to the order of this affiant

_____ has/have not been received by this affiant,

_____ has /have been received by this affiant but has/have since been stolen or lost,

_____ has/have been received by this affiant but has/have since been destroyed,

_____ has/have been examined by me and the first endorsement is not mine,

That I did not cash the warrant(s) and have never benefited in any manner from said warrant(s); that this affiant seeks to have the State of North Carolina replace said warrant(s), and in consideration of the issuance of the replacement warrant(s) by the State of North Carolina, I the undersigned, am held and firmly bound unto the State of North Carolina in the sum of _____ dollars (an amount equal to the sum of the warrant(s) involved herein), to be paid to the State of North Carolina, to the payment whereof, well and truly to be made, I bind myself and each of my heirs, executors and administrators, firmly by these presents, so that if I, my heirs, executors or administrators, shall at all times save harmless and keep indemnified the State of North Carolina against any claim, demand, loss or expense of any character, and against all loss and damages whatever that shall or may result at any time to the State of North Carolina, or any agency thereof, arising out of and by reason of the issuance to the undersigned of the duplicate warrant(s) in replacement of the warrant(s) hereinabove described, then this obligation to be void and of no effect, otherwise to be and remain in full force and effect.

WITNESS my hand and seal, this _____ day of _____, 20_____.

Affiant Signature _____ SSN _____

Affiant Address (include Street Name, City, State and Zip Code)

Affiant Phone Number _____

Subscribed and sworn to be before me, this _____ day of _____, 20_____.

Notary Public: _____ (Seal)

Commission expires: _____