

Merck Sharp & Dohme FCU

Claim to Lost, Stolen, or Destroyed Cashier's Check, Teller's Check or Certified Check

_____, hereby assert a claim
to the following described cashier's check, teller's check or certified check:

Remitter

Payee:

Date:

Amount

Check number:

Account number:

(a copy of the remitter's copy may be attached)

and request payment of the amount of the check. My **Declaration of Loss** is attached hereto. I understand that the claim has no legal effect until it is enforceable. A claim becomes enforceable at the **LATER of**

1. the time the claim is asserted; or
2. the 90th day following the date of the check, in the case of a cashier's check or teller's check or the 90th day following the date of acceptance in the case of a certified check.

I further understand that my claim may be unenforceable if the Declaration of Loss fails to meet the requirements of Section 3-312 of the Uniform Commercial Code or if it fails to reach the bank at a time and in a manner which affords the bank reasonable time to act on it before the check is paid.

I agree to provide reasonable identification if so requested by the bank.

Signature of claimant

Date: _____

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