

TAX OR RETURNED CHECK AFFIDAVIT

STATE OF KANSAS)
) SS
COUNTY OF SEDGWICK)

I, _____, resident of _____, of
(Typed or printed full name) (County)
lawful age, being first duly sworn on oath, state as follows: I live at the following
address:

_____, _____, _____
(Street and No. or Rural Route) (City) (Zip Code)

TAX AFFIDAVIT

RETURNED CHECK AFFIDAVIT

I do not own, nor have I ever owned the
following property:

I am not the same person who is listed on
your return check list:

1. Vehicle: name, make, style, I.D. No.

Check Name _____

Check Amount _____

2. Other property, describe fully:

Check Number _____

Check Date _____

PIN _____ YEAR _____

PIN _____ YEAR _____

PIN _____ YEAR _____

PIN _____ YEAR _____

Signature _____

Social Security Number _____ Driver License Number _____

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

SEAL

(Notary Public)

My Commission Expires:
