AFFIDAVIT FOR DUPLICATE CHECK

STATE OF NEW MEXICO  )
 )ss.
COUNTY OF BERNALILLO  )

I, ____________________________________________ being first duly sworn upon oath
(Affiant)
dispose and state that:

1.  Check Number _________________________ dated _________________________
in the amount of $___________________________ and payable to the order of

_____________________________________ was _________________________ (Lost, Destroyed, Never Received)
(Affiant)

2.  Affiant further states that he/she never received any benefit from the value
of said check or any part thereof, and further states he/she did not present this check for
negotiation of payment.

FURTHER AFFIANT SAYETH NOT.

________________________________________
Name Printed

Date: ________________________________

________________________________________
Signature

SUBSCRIBED AND SWORN to before me this ____ day of ______ 20__.

________________________________________
Notary Public

My Commission Expires: