

MINNESOTA MANAGEMENT & BUDGET
AFFIDAVIT CONCERNING A STATE OF MINNESOTA PAYROLL WARRANT
Made Pursuant to Minnesota Statutes, Section 16A.46

STATE OF _____ COUNTY OF _____

_____ residing at _____
(Affiant's Name) (Present Address)

_____ County of _____ being first duly sworn, hereby deposes and says that:

State of Minnesota warrant number _____ Issued _____,

to _____ Employee ID _____,
(Insert Name, Employee ID and Address on the Original Warrant)

Address: _____

In the amount of _____ dollars, was _____

If the above warrant was received but lost, was it endorsed? Yes No

And that if said original warrant ever comes into his/her possession, s/he will promptly return it to the Minnesota Management & Budget, 658 Cedar St, Ste 400, Saint Paul, MN 55155-1616, and s/he will reimburse the state for any loss which it may sustain by reason of any false statement, fault, or act on his/her part concerning this matter,

And that this affidavit is made for the purpose of securing the issuance of a duplicate warrant to him/her in the aforesaid amount. **You must sign this affidavit before a Notary Public.**

Signature of Affiant

Signature of Affiant

Subscribed and sworn to before me this

_____ day of _____, _____

My commission expires _____

NOTE: A duplicate warrant will be issued 1 – 3 days after Minnesota Management & Budget receives this affidavit.

Person Sending Form	Phone Number
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Fax affidavit to Lost Payroll Warrants at (651) 296-8325. Mail original affidavit to Minnesota Management & Budget, Statewide Payroll Services, 658 Cedar St, Ste 400, Saint Paul, MN 55155-1616.

NOTICE: Name and Home Address are private data that will be available only to those individuals who need access to conduct legitimate business for Minnesota Management & Budget and to taxing authorities. You are not legally obligated to provide it. However, we may not be able to process this transaction without it.