



Declaration of Loss Form Corporate Draft

This **Declaration of Loss Form** should be completed if you have a corporate draft that has been destroyed, lost, or stolen.

Instructions:

1. Complete this form. We cannot process your claim until we have received all of the required information and/or documentation.
2. Submit this form and all supporting documentation to Community Choice Credit Union.
 - Deliver to any branch or
 - Fax to 248-785-5107 Attn: Electronic Services or
 - Mail to: Community Choice Credit Union
31155 Northwestern Hwy Suite 285
Farmington Hills, MI 48334

Original Corporate Draft Number Amount \$ Date Issued

Payee Name Payee Address

The Corporate Draft was: Lost Stolen Destroyed

Name Account Number

Daytime Phone e-mail address

I file this Declaration of Loss under penalty of perjury and supply the above & below information and warranties as required by Michigan Uniform Commercial Code 3.312. I declare that I no longer have possession of the above described corporate draft. I am the accountholder as noted above. The check was not transferred or lawfully seized. I cannot reasonably obtain possession of the check because it was **destroyed, lost or stolen**. (The Credit Union cannot process a declaration of loss claim on corporate drafts that are not lost, stolen or destroyed.) I understand that reasonable identification may be insisted upon by the credit union prior to acceptance of this declaration.

The credit union has the right to require a 90-day waiting period before the corporate draft will be reissued. The declaration of loss has no legal effect during the 90-day waiting period. If during the 90-day waiting period, the original check is presented for payment by the holder in due course, the credit union is obligated to pay the original check. Should this occur, I agree to reimburse the credit union for this amount, and understand it will be withdrawn from my account.

_____ Date _____
Member Signature

For Internal Use only: Request taken By (PA Name and Number):
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