# Declaration of Loss of Official Check

Complete and send the form to:

**Secure Message:** Log onto Online Banking, click Support, under the Contact Us section click Secure Forms to upload your document.

**Email:** customerservice@axosbank.com

**Mail:** Deposit Operations
P.O. Box 911039
San Diego, CA 92191-1039

**Questions?** Should you have any questions, please call us at (888) 502-2967.

## Agreements and Disclaimers

1. I have lost possession of the check. I did not willfully give/transfer the check to anyone. The check was not lawfully taken from me, for example, in a court ordered seizure.
2. I acknowledge that Axos Bank (the "Bank") has no obligation to pay the payee the amount of the check if (i) the Bank pays or has paid the check or (ii) if Bank is in the process of initiating payment and such payment was initiated before the Bank had a reasonable time to act on this Declaration, given the time and manner in which the Bank received this Declaration.
3. I understand that if the Bank payspayee after this claim becomes enforceable, the Bank will be relieved of liability on the check. In such cases (i.e., where the Bank has paid payee), if a holder in due course presents the check for payment, I agree to do the following:
    a. If the Bank pays the check, I must refund to the Bank the amount of the check within ten (10) days from the date written demand from the Bank is sent to the last known address shown on the Bank's records.
    b. If the Bank does not pay the check, I must pay the amount of the check to the holder in due course (Payee).
4. If I do not refund to the Bank the amount of the check upon request pursuant to the terms set forth herein, I understand that the Bank may enforce its rights in a court of law. I agree that in any court action to enforce this Declaration of Loss, whether I commence the action or the Bank commences the action, the prevailing party will be entitled to reasonable court costs, including attorney's fees.
5. I agree to defend, indemnify and hold harmless the Bank from any expenses, loss or damage incurred as a result of the Bank (i) releasing the proceeds of the above described check or (ii) relying on other instruction or information provided by me, including any claim by any person, organization or corporation arising from any transfer, pledge, negotiation or any assertion of any interest in the above described check. I also agree to indemnify and hold the Bank harmless for any and all loss or damage, including expenses and costs, including reasonable attorney's fees, on account of the Bank's refusal for payment of such item to any other claimant thereon.
6. I understand that the Bank will rely upon the statements contained in this Declaration of Loss.

# Declaration of Loss of Official Check

## A. Please fill in your information below.

Name:

Address:

Phone Number: Email:

## B. Please fill in all known details about the check below.

I am the: (*select one*)
- ☐ Payee
- ☐ Purchaser

For: (*select one*)
- ☐ Official Check
- ☐ Interest Check

Check #: Dated: Amount:

Account Number: Payable to:

The check was: (*select one*)
- ☐ Not Received
- ☐ Destroyed
- ☐ Lost (location unknown)
- ☐ Stolen

If the check was stolen, I: (*select one*)
- ☐ Have not filed a police report
- ☐ Have filed a police report:
  - Filed on (date):
  - With (department name):

## C. Please indicate how you would like to receive the funds.

We will not issue a replacement check sooner than 90 days after the issue date of the Official Check. Funds will not accrue interest and you will not be able to access these funds.

I would like the funds:
- ☐ Re-issued as a check and mailed to me at the address above
- ☐ Re-deposited into my account:

## D. Acknowledgement

I (including any and all of the undersigned, jointly and severally) declare under penalty of perjury, that the above information is true and correct. I acknowledge that I have read Axos Bank's Declaration of Loss of Official Check Agreements and Disclaimers and agree to the terms and conditions contained therein.

Signature Date

Printed Name



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DEP 310 (10/31/19)

MEMBER FDIC EQUAL HOUSING LENDER