

**Citrus County Clerk of the Circuit Court and Comptroller
UNCLAIMED MONEY COLLECTION AFFIDAVIT**

I, _____, the undersigned, swear and affirm the following:
(Print Full Name)

That the undersigned, if acting on behalf of him or herself, is the payee as named on the check;.

That the undersigned, if acting on behalf of another person, is authorized by a duly executed power of attorney or court decrees, copy of which is attached;

That the payee named on said check never presented it for payment nor requested a prior reissuance of said check nor received benefit from said reissuance. The payee agrees to indemnify the Citrus County Clerk of Courts and Comptroller for any duplication of money received or benefit derived from the original money due and the reissuance of same;

Dated this _____ day of _____ 2020

Signature

Payee's Current Mailing Address

City State Zip Code

Payee's Current Telephone Number

State Of Florida
County Of Citrus

Sworn to (or affirmed) and subscribed before me this _____ day of _____, 2020 by _____, who is personally known to me or who has produced a _____ as identification and signed this affidavit in my presence.

My commission expires _____

Commission number _____

Signature of Notary Public or Deputy Clerk

Please have signature notarized, and mail to:

Citrus County Clerk of the Circuit Court and Comptroller
Attn: Clerk Accounting - Annex
110 N Apopka Ave.
Inverness, FL 34450

or **Email to:** clerkap@citrusclerk.org