

WASHTENAW COMMUNITY COLLEGE Claim Non-receipt of Check or Direct Deposit and Affidavit

## CLAIM

date on the check or a mi	College will not process claims until a minimum of 13 days after inimum of 2 business days after date of direct deposit. Please call able, 734-973-3640 before you complete and submit this claim.
Student Name:	
WCC I.D. No.: @	
CHECK or Direct Deposit	Amount: \$         Check Date:
	Internal Use Only:       Check or Direct Deposit No         Check Date:       Amount \$
CLAIM INFORMATION Basis for Claim: (Check all applicable boxes)	<ul> <li>Payee Claims Non-Receipt of Funds</li> <li>Forged Signature</li> <li>Lost Check</li> </ul>
Claim Details/Comments (To be completed by the student)	
	AFFIDAVIT

The undersigned states and agrees:

- □ That the Claim information set forth above is true and correct to the best of my knowledge and belief.
- □ That this Affidavit is to initiate a stop payment on above referenced Check and claim for reimbursement of a check (hereinafter "the Check").
- □ That the undersigned agrees NOT to cash the above referenced check if it is delivered or found.
- □ That the undersigned has not received any direct or indirect proceeds, benefits, or value of any kind from the Check or Direct Deposit.

NOTE: Once the investigation has been processed, you will be notified via e-mail of the results and next steps.

Student Signature

Date

Please return form to:Washtenaw Community College<br/>Attn: Student Accounting<br/>4800 E. Huron River Dr.<br/>Ann Arbor, MI 48105<br/>Or turn in at the Cashier's Office, 2<sup>nd</sup> Floor Student Center Bldg.