

## AFFIDAVIT OF FORGERY ALTERATION OR UNAUTHORIZED CHECK

State / commonwealth of	, city/county of		, to wit:
	, being duly sworn, dep	oses and says that	deponent is
named as, or is the authorized representative of, the	(	maker, payee, indo	rser or other)
of the attached instrument ("Instrument") numbered	, dated		, drawn on
		in the sum of	
	dollars	(\$0.00)	and that:
Section 1. The basis for this claim is: (check all that	it apply. If none apply, w	rite "N/A" in the ma	argin to the
left of this Section 1 and proceed to Section 2, where	you should include a de	tailed description	of the claim):
☐ the signature of (check one) ☐ the Maker ☐ authorized;			•
☐ the Instrument is counterfeit (meaning it was no	t created using the Maker	's check stock and	it contains a
forged and unauthorized Maker's signature);			
☐ the Instrument, without authorization, was altered	ed or improperly complete	d as follows:	
☐ the Instrument was paid with a missing indorser	ment; and/or		
☐ (for remotely created drafts) the Instrument doe	s not contain a signature a	applied, or purporte	d to be
applied, by the Maker; and that the Instrument v	vas not authorized by the	Maker with regard t	to one or both
of the following: the amount stated thereon and	or the payee named there	eon,	
Section 2. Provide a detailed narrative statement concerning the Instrument (attach additional sheets Details		rrounding your cla	aim
Section 3. If this claim is for expedited recredit by	a Consumer relating to	a Substitute Chec	k, the
following must be completed:			
The Substitute Check was charged to my depos		t of my loss is <b>\$0.0</b> 6	0
<ul> <li>The nature of my claim is more fully described in Production of the original check or a sufficient or check was improperly charged to my account or additional sheets if necessary):</li> <li>Details</li> </ul>	opy is necessary to deterr	nine whether or not im is valid because	the substitute (attach

	20		attached. If a copy is not attached, describe the substitute
-	heck number, payee named	I thereon, da	te paid against your account, and check amount:
Details			
	57.		
or any benefi	it therefrom and that all	of said pro	t has not received any of the proceeds of the Instrument oceeds have improperly and wrongfully come into the tated below (attach additional sheets if necessary).
and/or negoti	ation of the Instrument a	as set forth	rsons may have been involved in the wrongful creation herein. If the deponent knows of no suspects, the provided below (attach additional sheets if necessary).
this Affidavit) reasonably as include, witho	will cooperate with all lassist and cooperate with f	aw enforce M&T Bank in ess to testify	the entity on whose behalf the deponent has executed ment investigations relating to the Instrument and will n the investigation of this claim. Such cooperation may before any court or other tribunal as to the truth of any
	it is being executed on be authorized to execute it o		entity, the individual executing this Affidavit represents said entity.
further unders	stand that M&T Bank may,	, without im	, under oath, and pursuant to the penalties of perjury. I plying any obligation to do so, report this matter to law otiation of the Instrument.
If this Affiday	vit is being submitted on b	ehalf of an	entity, the entity submitting this Affidavit is:
			Signature
Subscribed and	d sworn to before me		Print Name:
this	day of	, 20	Print Title*:
			*If signing as the duly authorized representative of an entity
Notary Public			-

This Affidavit is being submitted to M&T Bank in connection with a claim as set forth herein. M&T Bank has not yet determined the validity of the claim or whether M&T Bank will reimburse any party in connection with the Instrument. M&T Bank may rely on the representations made in this Affidavit in connection with its investigation concerning this claim and any decision regarding reimbursement.