



State / commonwealth of	, city/county of		to wit:
	, being duly sworn, dep	oses and says th	at deponent is
named as, or is the authorized representative of, the	(maker, payee, in	dorser or other)
of the attached instrument ("Instrument") numbered	, dated	78 CEC	, drawn on

			and that:
Section 1. The basis for this claim is: (check <u>all</u> th	at apply. If none apply, w	rite "N/A" in the	margin to the
			_
left of this Section 1 and proceed to Section 2, wher	e you should include a de	tailed description	on of the claim):
☐ the signature of (check one) ☐ the Maker ☐ authorized;	the Indorser on the Instru	ment is a forgery	and was not
☐ the Instrument is counterfeit (meaning it was n forged and unauthorized Maker's signature);	ot created using the Maker	's check stock ar	nd it contains a
the Instrument, without authorization, was alter	red or improperly complete	d as follows:	
The state of the s			
the Instrument was paid with a missing indorse	ement, and/or		
(for remotely created drafts) the Instrument do	es not contain a signature	applied, or purpor	rted to be
applied, by the Maker; and that the Instrument	was not authorized by the	Maker with regar	d to one or both
of the following: the amount stated thereon and	d/or the payee named there	eon,	
Section 2. Provide a detailed narrative statement concerning the Instrument (attach additional sheet Details		rrounding your	claim
Section 3. If this claim is for expedited recredit by	y a Consumer relating to	a Substitute Ch	eck, the
following must be completed:			
The Substitute Check was charged to my deport		t of my loss is \$0	.00
 The nature of my claim is more fully described Production of the original check or a sufficient of check was improperly charged to my account of additional sheets if necessary): 	copy is necessary to deterr	mine whether or r im is valid becaus	not the substitute se (attach
Details			

☐ Check here if a copy of the substitute check is	attached. If a copy is not attached, describe the substitute
check by check number, payee named thereon, da	te paid against your account, and check amount:
Details	
	t has not received any of the proceeds of the Instrument occeeds have improperly and wrongfully come into the stated below (attach additional sheets if necessary).
ind/or negotiation of the Instrument 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).
his Affidavit) will cooperate with all law enforce easonably assist and cooperate with M&T Bank i	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 y before any court or other tribunal as to the truth of any
this Affidavit is being executed on behalf of an a hat he/she is authorized to execute it on behalf of s	entity, the individual executing this Affidavit represents said entity.
understand that this Affidavit is made voluntarily urther understand that M&T Bank may, without im inforcement and/or any person involved in the neg	, under oath, and pursuant to the penalties of perjury. Inplying any obligation to do so, report this matter to law otiation of the Instrument.
If this Affidavit is being submitted on behalf of an	entity, the entity submitting this Affidavit is:
	MPLOYEE MUST SIGN IN PRESENCE OF NOTAI
MUST BE NOTARIZED	Signature
subscribed and sworn to before me	Print Name:
nisday of, 20	Print Title*:
	*If signing as the duly authorized representative of an entity
otary 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.