

Lost/Stolen/Forged Check Checklist

INSTRUCTIONS:

Upon completion of the requested information below, please check the appropriate box.

Retain the original checklist in the case record file and enclose a copy of the checklist with the PA 207 Packet.

County Assistance Office Case Worker Contact Information	
Name:	<input type="checkbox"/>
Phone Number:	<input type="checkbox"/>
Fax Number:	<input type="checkbox"/>
E-Mail Address:	<input type="checkbox"/>

Payee Contact Information	
Name:	<input type="checkbox"/>
Address:	<input type="checkbox"/>
Phone Number:	<input type="checkbox"/>
E-Mail Address:	<input type="checkbox"/>
Fax Number:	<input type="checkbox"/>

Copy of Payee Valid Driver's License or Photo ID Card	<input type="checkbox"/>
PA 207	<input type="checkbox"/>
Notarized Forgery Affidavit	<input type="checkbox"/>
Information Sheet	<input type="checkbox"/>
Copy of Lost/Stolen/Forged Check	<input type="checkbox"/>
Police Report or Incident Number (<i>If check is \$100.00 or greater.</i>)	<input type="checkbox"/>

Police Department Contact Information	
Department Name:	<input type="checkbox"/>
Address:	<input type="checkbox"/>
Officer's Name:	<input type="checkbox"/>
Phone Number:	<input type="checkbox"/>