# BC Family Maintenance Agency <br> Lost BCFMA Cheque Declaration 

## Name

$\qquad$ Case ID $\qquad$
Address $\qquad$

1. I declare that I have not received, or have received and subsequently lost or accidentally destroyed:


For the sum of \$ drawn by the BC Family Maintenance Agency
(referred to below as "BCFMA") on the Canadian Imperial Bank of Commerce account.
2. I further declare that I have not received payment of such amount by any other means.
3. In the event of a replacement cheque being issued made payable to me, I agree not to cash, endorse, or transfer the original cheque should it ever come into my possession, but to return the original cheque to BCFMA.
4. In consideration of BCFMA issuing a replacement cheque for the original cheque, I will indemnify BCFMA from and against all costs, damages, interest and expenses with respect to the original cheque which may incur should the original cheque be cashed or endorsed to a third party at any time either by myself or by my representative.
This indemnity will be void upon the return of the original cheque being found and returned uncashed to BCFMA.
6. According to the best of my knowledge, information and belief, this cheque has not been cashed nor has this cheque been deposited to any of my accounts.

## SIGNATURE

By checking the box below you confirm that you are the payee named above and agree with the terms on this form.
I declare I am the payee and agree with the terms.

Name:
Date:

## To send the completed form:

- Sign into your web account on our website and send it with a web message; or
- Mail or fax it to our office:

BCFMA
Box 9216, Victoria, BC V8W 9J1
Toll-free: 1-866-557-2427
Fax: 250 220-4050
Please note: The cheque number, cheque issue date and cheque amount must be included on the form prior to signing and sending in the form. If you need this information:

- Sign into your web account on our website and send web message; or
- Call our office above.

