TREASURER'S OFFICE **WAUKESHA COUNTY**

PAMELA F. REEVES
County Treasurer

THERESA M. SCHULTZ
Deputy Treasurer

515 W. Moreland Blvd., Room 148
Waukesha, WI 53188

Phone: (262) 548-7029
Fax: (262) 896-8037

AFFIDAVIT OF OWNERSHIP AND INDEMNITY AGREEMENT

The undersigned, being first duly sworn on oath says:

1. That I am the owner of unclaimed funds presently being held by Waukesha County and identified in the legal notice published by the Treasurer.

2. That proof of my ownership of such funds arises from the following facts:

Case #	Amount

3. That I hereby request Waukesha County to pay such unclaimed funds to me and hereby agree to completely indemnify Waukesha County against any claim to such funds which might be made by any person, in the event that person is determined to be the rightful owner of such funds.

_____ Date _____
Claimant's Signature

Address where check should be mailed:

Notary:
Subscribed and sworn to before me
this ____ day of _____, _____.

_____
Name

_____
Address

_____
Notary Public Signature
My Commission Expires: _____

_____
City, State, Zip

_____
Telephone Number

To Be Completed by Treasurer's Office:

Proof of Identity: _____ Driver's License

_____ Passport

_____ School ID

_____ State Issued ID