

Date: \_\_\_\_\_

Check Payee Name: \_\_\_\_\_ Panther ID: \_\_\_\_\_

Address: \_\_\_\_\_ Apt/Unit/Suite #: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_ Phone: \_\_\_\_\_

New Address?  YES  NO

*If this is a change of address, you must also submit your change to the OneStop office:*

Reason for requesting replacement check:  LOST  STOLEN  NEVER RECEIVED

\*Check Date:

\*Check Amount:

*\*This information can be confirmed by reviewing your student account.*

**Please initial the following lines confirming acknowledgement of the statements below:**

\_\_\_\_ By submitting this replacement check affidavit, I have confirmed that I am the check payee and that I am authorizing FIU to cancel any outstanding paper checks and have them reissued.

\_\_\_\_ I confirm that I have either signed up for direct deposit on my FIU portal or have changed my **home address** to a different US address. I understand that any replacement funds will be held until such actions have been completed.

\_\_\_\_ I understand that this affidavit can take up to **two weeks or longer**, dependent on investigation results.

\_\_\_\_ I understand that if the original check is received, I must return it to the University's Controller's Office marked "**VOID**" immediately. Any attempt to cash this check will result in bank and University's fines to me. I understand that FIU is not held liable for any fines that may occur if I attempt to cash the original check.

**By signing this line, I confirm that I have read and understood all prior statements and would like to continue to with the replacement check process.**

**Claimant Signature:** \_\_\_\_\_

**Please return this form with all sections and signature line completed**

**For Office Use Only**

Check #: \_\_\_\_\_ Date: \_\_\_\_\_ Amount: \_\_\_\_\_

Check #: \_\_\_\_\_ Date: \_\_\_\_\_ Amount: \_\_\_\_\_

Check #: \_\_\_\_\_ Date: \_\_\_\_\_ Amount: \_\_\_\_\_

Original Verified by: \_\_\_\_\_