



## AFFIDAVIT OF FRAUDULENT ACTIVITY

### INSTRUCTIONS

- I. Prior to completing this form, vendor must contact the agency they are doing business with to inquire about the status of the check(s) and confirm the check(s) has been cashed. This "Affidavit of Fraudulent Activity" is **NOT** applicable to stale dated or lost checks. If the check(s) is not an FMS issued check, i.e. one that is paid out of the NYC Treasury, then vendor must contact the agency they are doing business with to complete a separate/different process.
- II. Vendor must request and obtain a copy of the cashed check(s), *both sides*, from the agency they are doing business with.
- III. Vendor must complete, sign, and notarize the "Affidavit of Fraudulent Activity" form on the following page (one form per check/claim).
- IV. **Mailing Original Affidavit of Fraudulent Activity Form**

The original (completed, signed, and notarized) Affidavit of Fraudulent Activity form along with this page and a copy of the check(s) should be mailed to the following address:

**NYC Department of Finance, Treasury Division**  
**66 John Street, 12th Floor**  
**New York, NY 10038**  
**Attention: Vendor Payment Forgery Claims**

### VENDOR CONTACT INFORMATION

- In order to serve you better during the investigation/recovery, please complete the following:

<b>TIN/SS#:</b>	
<b>Contact Name:</b>	
<b>Vendor Name:</b> (As it appears on Check)	
<b>Vendor Address:</b> As it appears on Form W-9 or previously paid check(s)	
<b>Email:</b>	
<b>Phone &amp; Fax No.:</b>	

**Payee Information Portal (PIP) of the City of New York** - The Payee Information Portal is a service that allows you, as a payee/vendor for the City of New York, to manage your own account information, view your financial transactions with the City of New York and much more. Click on the link below to begin filling out an electronic application to become a payee/vendor for the City of New York. <https://a127-pip.nyc.gov/>



STATE OF \_\_\_\_\_

COUNTY OF \_\_\_\_\_

### AFFIDAVIT OF FRAUDULENT ACTIVITY

\_\_\_\_\_, residing/working at the address given below, being duly sworn on oath deposes and states that I am of legal age, and that the check or draft described below has been examined and the item is being disputed on the grounds of:

Forged/Unauthorized Endorsement (Signature appearing on the back of the check)

Improper/Missing Endorsement (Incorrect or no signature appearing on the back of the check)

Altered: Amount / Payee / Date (*Check all that apply*)

Account Number	Check Number	Amount (\$)	Issue Date	Paid Date
xxxxxx8539				

Payable to \_\_\_\_\_

Maker/Drawer: City of New York Department of Finance

Drawn on: Citibank

If applicable: Altered from \_\_\_\_\_

Altered to \_\_\_\_\_

The undersigned denies having signed or endorsed or altered such check or draft previously, nor have I authorized or procured such signature, endorsement or alteration of said item. I further warrant that no proceeds or benefits from the payment/negotiation of the item were received directly or indirectly by the undersigned. By my signature below, I attest to the truthfulness of my statements above and agree, if requested, to assist or testify on the Bank's behalf in the resolution/prosecution of this matter.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
(Include title, if company/corporations)

\_\_\_\_\_  
Company's Name (if applicable)

\_\_\_\_\_  
Address

\_\_\_\_\_  
Address

Subscribed and Sworn to Before me

This \_\_\_\_\_ Day of \_\_\_\_\_, 20\_\_

\_\_\_\_\_  
Notary Signature & Seal or Stamp

**Please note: If altered, the above signature must be submitted by an authorized individual of the CITI Account holder.**

If Affidavit is completed outside the USA or Puerto Rico, swear before a Consul or Vice Consul of the USA or before any official authorized to administer oaths and then submit to such Consul or Vice Consul to be validated OR attach an appropriately prepared apostille, if applicable.