

DECLARATION TO OBTAIN DUPLICATE OF LOST OR
DESTROYED CHECK

I, Angie Brossard, declare:

1. That I am the legal owner of a check legally drawn by the Auditor of the County of Lake, State of California.
2. That the check, dated 11/19/20 + 12/10/20, 2020 was numbered #808756 / 809565
3. That the check was drawn in favor of the declarant herein, as payee, and was in the amount of
\$ 943.71 / 771.64.
4. That the check has not been paid but was lost/destroyed in the following manner:
Spouse passed away - never cashed checks

I CERTIFY (OR DECLARE) UNDER PENALTY OF PERJURY UNDER THE LAWS OF THE STATE OF CALIFORNIA THAT THE FOREGOING IS TRUE AND CORRECT.

EXECUTED AT Lakeport, CA, ON Feb 21, 2025
(City) (State)
Angie Brossard
(Signature)
4020 Hillcrest Rd
EL Sobrante, CA 94803
(Address)

COUNTY OF LAKE USE ONLY - Requesting Department

Submitted By: Auditor Controller
(Agency/Department)
By: Peter Barziano 10 Property Tax Manager
(Authorized Personnel) (Title)
Date: April 30th 2025
Check Drawn on Fund # 100
Conclusion: Stale dated - Merle "Mudyn" Brossard deceased. Reissue
Lost ☐ Destroyed ☐ Fraudulent Endorsement ☐

2025 FEB 21 A 10:48
AUDITOR-CONTROLLER
COUNTY CLERK

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"Angie Brossard"

REISSUE APPROVED BY _____
(Deputy Auditor-Controller) (Date)

STOP PAYMENT DATE: _____

CHECK CANCEL DATE: _____ JE# _____

Revised Dec 2009