

From: _____

DUE DILIGENCE FOR OUTSTANDING CHECK

To:

Date: _____

Re: Disposition of Outstanding Check

Our records indicate that the following check issued to you is still not cashed:

<u>Check#</u>	<u>Date Issue</u>	<u>Amount Issued</u>
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Please indicate the disposition of the check on the bottom of this form and return it to us as soon as possible.

Disposition of Check

___ I cashed the above check. Provide date cashed, if known: _____

___ I am holding the above check for the following reason:

___ I received the above check, but it has been lost or destroyed. Please issue a replacement check.

___ I did not receive the above check. Please issue a replacement check.

___ Other, explain:

Signature: _____

Address (if other than above):

Return this signed form to: