

CHECK RECOVERY LOG

Exhibit 8

Burglary

Mysterious Disappearance

Date of Occurrence: \_\_\_\_\_

Client's Name: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_

State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Phone Number: ( ) \_\_\_\_\_ Amount of Check: \$ \_\_\_\_\_

Date of Check: \_\_\_\_\_ Departmental Receipt Number \_\_\_\_\_

Initial contact made by: \_\_\_\_\_

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

Response received: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Date written request sent: \_\_\_\_\_ (within 3 days of the telephone contact)

PLEASE USE CERTIFIED MAIL

Mail receipt number: \_\_\_\_\_ Date mailed: \_\_\_\_\_

Was a replacement check received within thirty (30) days?

Yes  NO

Additional contact made: (A replacement check must be issued within 10 days)

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

Response received: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

Other efforts made to recover lost check: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_