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REQUEST FOR REPLACEMENT OF LOST OR DESTROYED WARRANT

STATE OF MINNESOTA,)) SS
County of Crow Wing)

_____, being duly sworn, on oath says: that
He/she is the owner of a certain Warrant (check), dated: mm/dd/yy _____
Numbered _____, issued by Crow Wing County to _____
In the sum of \$ _____, which has been _____.
(Lost, Destroyed, Stale Dated)

(Signature)

(Date)

Please include address where check is to be mailed.
