

County of Sacramento



AGREEMENT AND BILL OF SALE (Business Entity)

Date: _____

Warrant Number: _____ ("Warrant") Warrant Date: _____

Warrant Amount: _____

Warrant Payee: _____ ("Payee") Payee Telephone Number: (____) _____

Payee Address: _____

I, the person signing below, represent that (a) I am the owner or authorized representative of the Payee named on the above-listed Warrant; (b) I am authorized to endorse, convey, and sell the Warrant on behalf of the Payee; (c) I am authorized to enter into this Agreement and Bill of Sale on behalf of the Payee and to bind the Payee to its terms; and (d) the Payee is the owner of the below bank account and the account information provided below is true and correct.

The Payee hereby sells and conveys to the County of Sacramento ("County") all right, title, and interest to the Warrant, monies owed under the Warrant, and all interest accrued under the Warrant.

The Payee agrees to pay to County a sale administrative fee in the sum of \$2.00.

County agrees to deposit the face amount of the Warrant, less the \$2.00 administrative fee, in the below bank account. If this Agreement is signed by County before noon of the above date, the deposit will be made no later than 5:00 p.m. on the first business day following the above date. If it is signed by County after noon of the above date, the deposit will be made no later than 5:00 p.m. on the second business day following the above date.

Deposit Amount: \$ _____ [Warrant Amount, less \$2.00]

Financial Institution: _____

Routing Number: _____ Account Number: _____

The Payee hereby authorizes County to initiate credit and, if necessary, debit entries and adjustments for any credit entries in error to the bank account, and to credit or debit the same from such account. The Payee acknowledges that this authority will remain in effect until it cancels it in writing and that the origination of transactions to the account must comply with the provisions of U.S. law. I declare under penalty of perjury under the laws of the State of California that the information provided above is true and correct.

I understand and agree that should any of the representations made herein to the County regarding the Warrant(s) prove to be false or otherwise incorrect, constituting grounds for the refusal or failure of the State to honor the Warrant(s) upon presentation by the County, the County is hereby authorized to reclaim the funds paid into the account designated below. This said reclaiming action by the County may be done without further evidence of approval by owner(s) of the designated account. The parties further understand and agree that the County's legal remedies for dishonor of the Warrant(s) transferred per this agreement are not limited to the administrative remedy set forth herein.

Payee's Authorized Signature

Date

Print name of signer

Print address of signer

Signer's Identification No. (CDL/CAID): _____

COUNTY OF SACRAMENTO

Authorized Signer

Date

Office use only: Processing Date: ____/____/____ Sequence Number: _____