

# California Claim Form

**\*Please Return by May 31, 2023\***

If we do not receive your form by the May 31, 2023 deadline, the law requires us to remit this property to the state of California, to whom all further claims must be directed. If your account is transferred to the SCO, you will be required to submit a claim to the SCO in accordance with the provisions of the California Code of Civil Procedure in order to recover your funds. If you request a replacement check, please note that the check will be sent to the address you indicate approximately 6 to 8 weeks from June 15, 2023. **Due to the volume of claims processed, we ask that you not attempt to contact us through other means about your claim, as that would likely delay the process of reissuance.**

Please indicate the name of the company holding the funds: \_\_\_\_\_

POPULATE ALL FIELDS BELOW				
Name(s):		Account #:		Date:
Current Street Address (include apt. number):				City:
State:	ZIP:	Phone Number:	Email:	
Signature of all owners:				

Please list the amount of the property: \_\_\_\_\_

**\*\*Each signature must be notarized if refund amount is over \$250.00. Likewise, if the refund amount is over \$10,000 you must obtain a Medallion Signature Guarantee from your local bank or credit union. If any information required to be provided on this form is omitted, all funds will be escheated to the state of California. IF there is a co-owner, the signature of each party is required.**

### Notary Section for amounts over \$250

STATE OF \_\_\_\_\_ COUNTY OF \_\_\_\_\_

On this, the \_\_\_\_\_ day of \_\_\_\_\_, 2023, before me,  
\_\_\_\_\_, a notary public, the undersigned

\_\_\_\_\_,  
personally appeared and is/are personally known to me (or satisfactorily proven) to be the person(s) whose name(s) is/are subscribed to the within instrument, and acknowledged that he/she/they executed the same for the purposes therein contained.

In witness here, I hereunto set my hand and official seal.

\_\_\_\_\_  
(Notary Public)

### Medallion Section for amounts over \$10,000

\_\_\_\_\_  
Affix Medallion Signature Guarantee Stamp Here

### Please Return Completed Form To:

Mail Management – P.O. Box 724016 – Atlanta, GA 31139-9998  
www.letterreturn.com  
Fax: 770.627.4189

## Information for Claimants

We are pleased that you have been located and will soon be reunited with your funds. This form must be properly and completely filled out before it is returned.

**All parties must sign the form.** In the event that there is more than one owner, the signature of each party is required in order to have the money refunded.

If there has been a **name change**, additional documentation must be submitted with the claim form.

Examples of acceptable documentation are:

- Marriage license
- Court order changing an individual's name
- Divorce decree showing the restoration of maiden name
- A copy of a driver's license in the old and new name. Each license must bear the same license number.

If there has been a **death** of the owner or co-owner:

- A copy of the death certificate must be submitted.
- A Letter of Testamentary or other legal document showing the name of the executor of the estate of the deceased must be submitted.
- The check will be issued in the name of "The Estate of" the deceased AND the name of any surviving borrow/co-borrower.
- You may wish to consult your legal representative and/or bank to ensure you are able to cash such a check before you claim the funds. If you do not have a bank account in the name of "The Estate of" the deceased, you may need to open one.

If there has been a **divorce**:

- Each party to the mortgage/loan must sign the form in order for a check to be reissued because these funds are owed to both parties jointly.
- The only exception is if the divorce decree/property settlement specifically states that the tax and insurance escrow account on the mortgage/loan is to be awarded to one of the parties. A copy of the divorce decree/property settlement, so stating, date stamped by the court, must be submitted.

If the owner of the funds is a **business**:

- The full Federal Tax Identification Number of the business must be provided.
- Documentation that the signer is authorized to collect, or release interest in: the funds on behalf of the company must be provided. Board minutes (must be certified to be a true and correct copy) and/or a letter on company letterhead (signed by an officer of the company, whose signature must be notarized) stating that the signer is authorized to collect funds on behalf of the company is required.
- If you are claiming funds issued to you for the benefit of a third party, we will include your internal identification number for the third party, if you provide it, on the reissued check.
- If you are releasing your interest in funds issued to you for the benefit of a third party, please provide the last known address you have on record for the third party.

Please understand that it is our full intent to reconnect you with your funds. However, if the form is not completed in the manner that is required, we will not be able to process your claim. We apologize as we cannot honor any special request to expedite claims.

Thank you for your patience and cooperation.

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