



City of Santa Cruz

Finance Department, Accounts Payable

Request for Release of Unclaimed Property Form

I request the following check be reissued:

Check number: _____ Check amount: _____

I was unable to cash the original check issued to me because:

☐ I lost it. ☐ I never received it. ☐ I forgot to cash it. ☐ It was destroyed.

☐ Other: _____

Company Name (if applicable): _____

My Name: _____

Tax Payer ID number or Social Security Number: _____

As per IRS regulations, Tax Payer ID or Social Security numbers are required for all checks issued.

Current Street address: _____

Current City, State, Zip: _____

Current Phone number: _____

Under penalty of perjury I claim I am the owner of the above described claim and I am the person, or am representing the company, as described in this claim.

Signature: _____ Date: _____

Attach:

- Copy of official identification, such as a driver's license, military identification card, or passport.
- Proof of the address original check was issued to, such as copy of pay stub, business card, tax return, mortgage statement, telephone or utility bill, bank or credit card statement.

If you cannot provide the requested documentation, attach a letter explaining why you are entitled to the unclaimed check and identify any special circumstances that may apply to your claim.

We will request additional information if it is needed to process your claim.

Special note: If the payee is a minor, or deceased, or the company is in bankruptcy, please contact us regarding additional information that will be required.

All information provided will be kept completely confidential.

Send the completed Release of Unclaimed Property form, and all additional documentation, to us via:

Email ap@cityofsantacruz.com

Fax 831/420-5061

Mail City of Santa Cruz, Accounts Payable, 1200 Pacific Ave, Suite 290, Santa Cruz, CA 95060

Direct questions to 831/420-5170 or ap@cityofsantacruz.com

Internal Use Only

Form received on: _____

Approved: _____ Date: _____

Replacement check number: _____ Date: _____ Amount: \$ _____