



## UNCLAIMED PROPERTY CHECKLIST REQUIRED DOCUMENTATION

Telephone 601-359-3534

✓ **If you are an Individual claiming property, you must provide:**

- \_\_\_ **Photo ID:** Copy of a driver's license, passport, military ID card or Official Identification Card.
- \_\_\_ **Social Security Number(s):** Your SSN and the account owner's SSN if you are not the owner.
- \_\_\_ **Documentation of owner address as listed on Website or Letter:**  
Examples include old utility bill, school records, bank statement, or cancelled checks.
- \_\_\_ **Documentation of owner's name change if different name appears on the request form:**  
Examples include a copy of a marriage license, divorce papers, or other legal documentation
- \_\_\_ **Notarized Signature of individual(s) claiming property.**

✓ **If you are not the reported owner, you must also provide:**

- \_\_\_ **If owner is deceased:** A copy of the owner's death certificate **AND** a copy of filed will or obituary.
- \_\_\_ **If the owner is a minor:** A copy of the birth certificate.

✓ **If you are claiming a property of your business, you must provide:**

- \_\_\_ **Photo ID of individual submitting claim:**  
Examples include a copy of a driver's license, passport, military ID card, or business ID card.
- \_\_\_ **Employer Identification Number:** The EIN of your business or organization.
- \_\_\_ **Documentation showing your position and authority to make the claim:**  
Examples include a business card or authorization letter on company letterhead.
- \_\_\_ **Notarized signature of individual(s) claiming property.**

Please note: We may require additional documentation to process your claim.

**Tate Reeves**  
State Treasurer

**John Younger**  
Assistant State Treasurer  
Director, Unclaimed Property



State of Mississippi Treasury Department  
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TATE REEVES  
State Treasurer

## Unclaimed Property Claim Form

John Younger  
Assistant State Treasurer  
Unclaimed Property Division

PROPERTY ID # \_\_\_\_\_

### **Instructions: Read documentation checklist carefully to complete this form**

**Please provide all required information; without it we cannot process your claim request.**

**You must send a copy of your *drivers license & social security card* with this claim!**

**A. Claimant's Name and Current Address:**

**B. Original owner name as listed on  
Website or Letter:**

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

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

**Social Security Number/Tax I.D.** \_\_\_\_\_

**Daytime phone number** \_\_\_\_\_

**C. If your name is different from the name shown in Section B, please explain why:**

\_\_\_\_\_ Marriage/Divorce .....Attach a copy of filed papers

\_\_\_\_\_ Owner is deceased.....Your relationship to deceased \_\_\_\_\_

\_\_\_\_\_ Guardian, executor, administrator

\_\_\_\_\_ Other.....Please explain: \_\_\_\_\_

**Subscribed and sworn to before me this**

\_\_\_\_\_ Day of \_\_\_\_\_, 20\_\_\_\_

\_\_\_\_\_  
**Notary Public** County/State

My commission expires \_\_\_\_\_

\_\_\_\_\_ Day of \_\_\_\_\_, 20\_\_\_\_

\_\_\_\_\_  
**Notary Public** County/State

My commission expires \_\_\_\_\_

**Affidavit:** The named claimant hereby certifies that this claim for property presumed abandoned is valid and just, that all statements herein are true and correct, and that upon payment of this claim said claimant will indemnify and hold harmless the State, its officers and employees, from any other valid claims to the said property.

**Signature(s) of ALL Claimants – Must be Notarized**

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

*Due to heavy demands on our small staff,  
please allow from 4 to 6 weeks for a response.*