

UNIVERSAL HOLDER FACE SHEET (must be completed and submitted with all reports)

UFS-1 (Rev. 04/2024)

Upload to the online Holder Reporting Portal with all other required reporting materials.

Report ID# (Remit Report Only)

Required**Notice Report****Or****Remit Report**

Due Before November 1

Due Between June 1 and June 15

Life Insurance Due Before May 1

Life Insurance Due Between December 1 and December 15

Voluntary Compliance Program (See form SCO VCP 02 for due date)

Voluntary Compliance Program (See 14F Remit Reminder Letter for due date)

Supplemental Notice Report (For reports with properties that should have been but were not included in the previously submitted Notice Report)

Section A—Holder Information

FEIN	Branch Number	Report As of Date	Check Number / EFT Debit Ref Number (Remit Report Only)
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Section B—Holder Contact Information**Holder Name**

Street Address

P.O. Box Number	City	State	Zip Code	Country
Contact Name (For report completion)	Title	Phone Number	Extension	

E-mail Address

Section C—Property Owner Contact Information**Holder Name**

Street Address

P.O. Box Number	City	State	Zip Code	Country
Contact Name	Title	Phone Number	Extension	

E-mail Address

Section D—Holder Agent Contact (If Applicable)**Agent Name**

Street Address

P.O. Box Number	City	State	Zip Code	Country
Contact Name (For report completion)	Title	Phone Number	Extension	

E-mail Address

Section E—Holder CEO/CFO

Name

Title

Address

E-mail Address

P.O. Box Number	City	State	Zip Code	Country
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Section F—Holder Report Totals

Total Reported/Remitted Dollars

Total Reported/Remitted Shares

Includes Safe Deposit Box

 Yes No**Any Remittance of \$2,000 or more must be paid by Electronic Funds Transfer (EFT), pursuant to Code of Civil Procedures (CCP) Section 1532.***Section G—Holder Business Information**

Organization Type:

Incorporation State:

Incorporation Date : / /

NAICS Code:

Charter

Federal or State Charter Date: / /**Section H—Demutualization Proceeds** This report includes proceeds from the demutualization of an insurance company.**Date of Demutualization** _____ CCP Section 1515.5 (a) CCP Section 1515.5 (b) CCP Section 1515.5 (c)**Section I—Transfer Agent (If Applicable)****Agent Name**

Street Address

P.O. Box Number	City	State	Zip Code	Country
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Section J—VerificationSection J - **Verification** If made by an individual, shall be verified by the individual; if made by a partnership, by a partner; if made by an unincorporated association or private corporation, by an officer; if made by a public corporation, by its chief fiscal officer or other employee authorized by the holder (CCP Section 1530(e)).The undersigned, _____ declares, under penalty of perjury, that, to the best of (his) (her) knowledge and belief, the following sheets contain a full, true, and complete report of unclaimed property which is presumed unclaimed under the provisions of Part 3, Title 10, Chapter 7, Code of Civil Procedure, commencing with Section 1500, and Title 2, California Administrative Code, Sections 1150 et seq. **The Undersigned also confirms that all properties not listed on the Remit Report, which were initially included on the Notice Report, were not remitted due to contact by the apparent owner, or the property being reactivated or returned to the rightful owner.**

Signature	Title	Date
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Universal Holder Face Sheet Instructions

The Universal Holder Face Sheet (UFS-1) form must be completed and submitted with all reports.

Notice Report: Check this box when submitting a Notice Report. This report is due annually prior to November 1 or prior to May 1 for life insurance companies. Participants in the Voluntary Compliance Program (VCP) have alternate due dates specified in the VCP Requirements (SCO VCP 02) form. If the holder identifies accounts that were not included on the original Notice Report, they must be reported on a separate Supplemental Notice Report and must not be included on the Remit Report.

Remit Report: Check this box when submitting a Remit Report. This report is due between June 1-15 or between December 1-15 for life insurance companies. Participants in the VCP have alternate due dates specified in the SCO VCP 02 form. All holders, including those enrolled in the VCP, should refer to the 14F Remit Reminder Letter to confirm when the Remit Report is due.

Voluntary Compliance Program: Check the VCP box only if the report is being submitted during the time frame assigned upon enrollment into the VCP and includes past-due property for which interest is requested to be waived. Participants in the VCP have alternate due dates specified in the SCO VCP 02 form.

Supplemental Notice Report: Check this box when submitting a Supplemental Notice Report, for holders who have identified accounts that were not included on the original Notice Report.

Report ID# (Remit Report Only): List the Remit Report ID number located on the upper right-hand corner of the Remit Reminder Letter (14F). If you did not receive a 14F letter, contact the Reporting Unit at 916-464-6284 for assistance. For Remit Reports, also include the EFT debit reference number or check number.

Section A - Holder Information: Provide the Federal Employer Identification Number (FEIN), branch number (if applicable), report "As of" date, and check number/EFT debit reference number. The FEIN and report "As of" date are required. Failure to provide this information will result in the report being rejected.

FEIN: Enter the FEIN number.

Branch Number: Enter the branch number, if applicable.

Report "As of" date: The "As of" date is the cut-off date of your reporting cycle (either June 30th or the holder's fiscal year end). If the fiscal year-end date falls between January 1 and June 30, the report is due before November 1 of the same year. If the fiscal year end date falls between July 1 and December 31, the report is due before November 1 of the following year. This date is not the signature date or report due date. The report "As of" date for life insurance companies and insurance corporation demutualization or reorganization proceeds is December 31 [CCP section 1530 (d)].

Check Number/EFT Debit Ref Number: Applies to Remit Report only.

Section B – Holder Contact Information: The holder name is required. The holder is the company reporting the property. Provide complete contact information for the person in the company responsible for completing the report. This contact information will be used by the State Controller's Office to contact the holder with questions regarding the report. Failure to provide this information will result in the report being rejected.

Section C – Property Owner Contact Information: Provide complete contact information for the person responsible for handling inquiries from owners attempting to claim their property. The contact information on the UFS-1 will be printed on notices to property owners. If this section is left blank, the contact information provided in Section B will be printed on notices to property owners. During the notice period, the contact person listed in Section C should expect phone calls and/or emails from owners claiming their property.

Section D – Holder Agent Contact (If Applicable): If the report is completed by a reporting agent (third-party vendor), enter the agent's name and contact information.

Section E – Holder CEO/CFO: Provide complete contact information for the company's Chief Financial Officer (CFO) or Chief Executive Officer (CEO), including a valid mailing address and email address.

Section F – Holder Report Totals: The total dollar amount (or share amount) is required. Fill in the total dollar amount reported (Notice cycle) or remitted (Remit cycle). Fill in the total shares reported for each cycle. Fill in zero (0) if no shares are remitted. Shares refer only to securities such as stock and mutual funds. Check yes or no to indicate whether or not the report includes safe deposit box contents or safe keeping items (property types SD01, SD02, SD03). Do not send safe deposit properties until they are requested.

Section G – Holder Business Information: Enter the holder's type of organization, state and date of incorporation, four digit North American Industry Classification System (NAICS) code, and charter type and date.

Section H – Demutualization Proceeds: Applies only if the report contains unclaimed proceeds from the demutualization of an insurance company.

Section I – Transfer Agent (If Applicable): If a holder is using a transfer agent for security-related properties, list the name and the address of the transfer agent.

Section J – Verification: The signature of an authorized person is required. For reports to be properly verified, the California State Controller's Office requires a signature on all UFS-1 forms. Electronic signatures are acceptable. Reports with UFS-1 forms that do not contain a signature may be subject to interest at a rate of 12% per annum from the date the property should have been reported or remitted as prescribed by CCP section 1577. The UFS-1 form includes an affirmation stating that all accounts not included on the Remit Report, which were included on the Notice Report, are absent only due to reactivation or reunification of property with the owner.

Reporting agents submitting multiple reports at one time will be allowed to submit a transmittal letter with a signature that lists all reports being submitted. The transmittal letter must contain the signature of a person who meets the criteria under CCP section 1530(e). Multiple reports submitted by reporting agents that do not meet this criterion may be subject to interest at a rate of 12% per year from the date the property should have been reported or remitted as prescribed by CCP section 1577.

Submission: Upload to the online Holder Reporting Portal along with all other required materials.