



Controller Malia M. Cohen
California State Controller's Office
Unclaimed Property Division

SECTION I				CURRENT MAILING ADDRESS (TO BE COMPLETED BY ALL CLAIMANTS)			
(1) PRINT FIRST NAME	MIDDLE	LAST	DAYTIME PHONE ()	STREET ADDRESS	CITY	STATE	ZIP CODE
(2) PRINT FIRST NAME	MIDDLE	LAST	DAYTIME PHONE ()	STREET ADDRESS	CITY	STATE	ZIP CODE
SECTION II				CURRENT MAILING ADDRESS (TO BE COMPLETED BY INVESTIGATORS)			
(1) PRINT FIRST NAME	MIDDLE	LAST	DAYTIME PHONE ()	STREET ADDRESS	CITY	STATE	ZIP CODE
SECTION III				NOTICE TO CLAIMANT: INVESTIGATOR OR FINDER FEES			
<p>Under Section 1582 of the California Code of Civil Procedures (stated below), an investigator is <u>not allowed</u> to charge a fee of more than 10% of the recovered amount.</p> <p>CCP Section 1582 (Restriction on agreement to locate reported property)</p> <p>No agreement to locate, deliver, recover, or assist in recovery of property reported under Section 1530 may be executed until delivery is made to the State Controller. The fee or compensation agreed upon may not exceed 10% of the recovered property. The agreement must be in writing and signed by the owner after disclosure in the agreement of the nature and value of the property and the name and address of the person or entity in possession of the property. Nothing in this section shall be construed to prevent an owner from asserting, at any time, that an agreement to locate property is based upon excessive or unjust consideration.</p>							
CLAIMANT'S SIGNATURE:				DATE:			
CLAIMANT'S SIGNATURE:				DATE:			
INVESTIGATOR'S SIGNATURE:				DATE:			
SECTION IV				PRIVACY NOTIFICATION			
<p>The Information Practices Act of 1977 and the Federal Privacy Act require the Unclaimed Property Division to inform you that your Social Security number and other documents are requested for proper identification and processing of your claim. You have the right to view your records at this office by writing: Chief, Unclaimed Property Division, P. O. Box 942850, Sacramento, CA 94250-5873</p>							
SECTION V				AFFIRMATION			
<p>Each of the undersigned claimants affirms that claimant has read the claim and knows the contents thereof, and that claimant is the sole owner of the said claim and the sole person entitled to receive the money and property set forth in said claim. Each claimant certifies under penalty of perjury that original instruments such as securities certificates, checks, passbooks, etc., have been submitted or, if unable to produce such said original instruments, certifies that claimant has not sold, pledged, hypothecated or otherwise transferred said instruments or any interest or right therein. If said instruments are found by claimant, the claimant agrees to deliver them to the State Controller's Office for cancellation. Each claimant agrees to indemnify and hold harmless the State, officers and employees from any loss resulting from the payment of said claim.</p>							
CLAIMANT'S SIGNATURE:				SSN:			
CLAIMANT'S SIGNATURE:				SSN:			
<p>A notary public or other officer completing this certificate verifies only the identity of the individual who signed the document to which this certificate is attached, and not the truthfulness, accuracy, or validity of that document.</p>							
<p>STATE OF CALIFORNIA, COUNTY OF _____</p> <p>SUBSCRIBED AND SWORN (OR AFFIRMED) BEFORE ME ON THIS _____ DAY OF _____, 20____ BY _____, PROVED TO ME ON THE BASIS OF SATISFACTORY EVIDENCE TO BE THE PERSON(S) WHO APPEARED BEFORE ME.</p>							
SIGNATURE _____				(SEAL)			