

## CITY OF SAN DIEGO REQUEST FOR UNCLAIMED MONIES

CHECK NUMBER	AMOUNT

Each of the undersigned claimants certifies under penalty of perjury: That claimant is the owner of said unclaimed monies and the person entitled to receive the money set forth in the claim.

Each warrant-check was not endorsed and has not been paid, but was lost, destroyed, or mutilated before that same was paid by the city of San Diego, and cannot now be produced by the said payee.

Each claimant acknowledges and understands the City of San Diego will cancel that certain City warrant-check number(s) listed above, causing it to be non-negotiable when a replacement warrant-check is delivered to him/her.

Each claimant agrees to indemnify and hold harmless the City of San Diego, its officers, and employees from any loss resulting from the payment of said claim.

## EACH CLAIMANT MUST SIGN THIS AFFIRMATION OR THE CLAIM WILL BE RETURNED.

FULL NAME OR BUSINESS NAME		SOCIAL SECURITY NO. OR TAX I.D.			
CTDEE	T ADDRESS	CITY	STATE/PROVINCE	ZIP	COUNTRY
SINEE	I ADDRESS	CITT	STATE/PROVINCE	ZIF	COUNTRY
DAYTIME BUICNE		CIONATURE REQUIRER			TE
DAYTIME PHONE	SIGNATURE REQUIRED			DATE	

## YOUR SIGNATURE(S) MUST BE NOTARIZED IF THE CLAIM AMOUNT IS OVER \$1,000

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.

	before me,	.,
On	(insert name	e and title of the officer)
be the person(s) whose name(s) she/they executed the same in hi	who proved to me is/are subscribed to the within instrume s/her/their authorized capacity(ies), and he entity upon behalf of which the personal subscription.	nd that by his/her/their signature( s) on
I certify under PENAL TY OF PE true and correct.	RJURY under the laws of the State of 0	California that the foregoing paragraph is
WITNESS my hand and official s	eal.	
Signature	(Seal)	Request for Unclaimed Monies (Rev. 2-2023)