

# Unclaimed Property Claim Form & Checklist Comptroller of Maryland

Comptroller of Maryland Unclaimed Property Division 301 West Preston Street, Room 310 Baltimore, Maryland 21201-2385 410-767-1700, or 1-800-782-7383

See attachment for instructions
Please be sure to attach copies of all necessary documentation.

Part A - Claimant Informat	ion - Please print clearly		
Name of Claimant(s)		Social Security or FEIN Number	Daytime telephone number
Address of Claimant(s)			
City, state, zip code			
Relationship to original owner		Email Address	
Part B - Information on Pro	operty claimed - OFFICE USE	ONLY	
Original owner name		Social Security or FEIN Number	
Type of property	Holder name	· · · · · · · · · · · · · · · · · · ·	Amount of Property
Part C - Provide the followi	ng documents		
Copy of your driver's li	cense or other ID (Required)		
Copy of Social Security	Card or other documentation conta	nining social security number (Req	uired)
Bank documents (e.g.	passbook, bank statement, cancelle	ed check)	
Proof of affiliation with	:		
Letters of Administration	on Small Estate Papers	True Test Copy of Co	ourt Order
Copy of Death Certifica	ate(s) for:	,	
Other:			
Part D – Affidavit			
have not received any proper	we) hereby certify that the foregoing ty claimed, are entitled to it and kno state of Maryland and its officers and (us).	ow of no other person who claims	to be entitled to any portion.
X			
Signature of claimant Signa			ure of co-claimant
All services provided by the sign for assisting you in recovering for a fee for such claims are to	tate Comptroller's Office are free. Mag g any property within 24 months of t unenforceable.	aryland law provides that you do r he date it was turned over to this	ot have to pay a fee to anyone office. Contracts which provide
art E - For office use only			
Claim No.:	Control No.:	Holder No	).:
Report Year:	Received:	Total:	\$

#### **CLAIM YOUR PROPERTY**

## **Submitting Claims for Individuals**

- 1. Complete the information requested on the COT ST912 claim form.
- 2. Sign the form & attach the supporting documentation see below.
- 3. Mail to the address located on the top of your claim form.

## **Submitting Claims for Businesses/Organizations**

- 1. Complete the information requested on the COT ST912 claim form.
- 2. Updated W-9 (Required).
- 3. Provide information such as proof of address, ownership, or proof of authorization.
- 4. Provide additional information if it applies, such as proof of name change, affiliation, merger, acquisition, proof of organization closed, dissolved, sold.
- 5. Have the form signed by two officers of the organization and provide copies of IDs.
- 6. For reporting organization error or reimbursement use COT/ST 917 claim form (used by reporting organization requesting the return of funds from their own report).
- 7. Mail to the address located on the top of your claim form.

#### **Submitting Claims for Deceased Owners and Estates**

If there is a court-appointed estate representative, that person can submit a claim. If there is not a representative or the estate is closed, claims can be filed by:

- The surviving spouse, or
- Non-blood relative appointed by the court. (i.e. lawyer, banking institution etc.). In this case you will need to provide Letters of Administration or other letters of authority.
- 1. Complete the information in Part A of COT ST912 claim form and sign in Part D.
- 2. Attach a copy of the owner's death certificate and proof of address or ownership connecting the owner to the address or funds.
- 3. Provide the following documents as they apply:
  - o Letters of Administration from the Register of Wills.
  - o Small Estate Papers.
  - o Letters of Testamentary.
  - o Copy of photo ID of person claiming the funds.
- 4. Mail to the address located on the top of the claim form.

#### **Submitting Claims on Behalf of Another Person**

- 1. You can submit claims as a parent, custodian, conservator, trustee, guardian, power of attorney, or legal representative on behalf of another person
- 2. Complete the information in Part A of COT ST912 claim form and sign in Part D.
- 3. Attach proof of address or ownership connecting the owner to the funds.
- 4. Provide the following documents as they apply:
  - o Court documentation showing the authority to act on the original owner's behalf.
  - o Power of Attorney documentation showing the original owner is living and you as designated Power of Attorney.
  - Copy of birth certificate of minor child.
  - o Copy of your photo ID.
  - o Copy of Social Security Card for minor & custodian.
- 5. Mail to the address located on the top of the claim form.

# **Submitting Claims for Joint Accounts or Multiple Owner Accounts**

- 1. Complete the information in Part A of COT ST912 claim form and sign in Part D.
- 2. If it is a Joint Account, both owners must sign the claim form, as well as submit copies of photo ID, proof of SSN and proof of ownership or address listed.
- 3. If one owner is deceased, or in the case of divorce or any other change associated with the account, please submit supporting documentation
- 4. Mail to the address located on the top of the claim form

#### **Supporting Documentation for Claims**

- o All claimants must establish entitlement to the property sought.
- o Please follow the instructions on the claim form to determine what documentation must be provided.
- o If you still have questions, feel free to visit our FAQs.
- You should receive your funds once your claim is approved, or our office will reach out if additional information is needed.