STOP DO NOT STAPLE

ARIZONA FORM
600A

Arizona Department of Revenue
Claim for Unclaimed Property - Original Owner

Mail to: Arizona Department of Revenue • Unclaimed Property Unit • PO Box 29026 • Phoenix, AZ 85038-9026

You must read page 2, which may be on the reverse side, before completing this form.

1

Property ID Number or a brief description of the property you are claiming ▼

Original Property Owner's Name ▼

Original Property Owner's Social Security Number or Tax Identification Number ▼

Original Unclaimed Property Owner's Address as reported by the Holder ▼ ☐ Unknown

2

Claimant's Name ▼ ☐ Same as above

Claimant's Social Security or Tax Identification Number ▼ ☐ Same as above

Claimant's Date of Birth ▼

Email Address ▼

Daytime Telephone Number ▼

Evening Telephone Number ▼

Joint Owner's Name ▼ ☐ Not applicable

Joint Owner's Social Security Number ▼

Joint Owner's Date of Birth ▼

Address where you would like correspondence, including payment sent ▼

City or town ▼ State ▼ ZIP Code ▼

3

In consideration of the payment or delivery of unclaimed property as a result of this claim, I agree to indemnify the State of Arizona and hold it harmless for and from all claims and loss, cost, damages and expenses that the State of Arizona may sustain by reason of turning over the said property and by reason of its refusal hereafter to pay said property or any part thereof to any other person(s). I agree that if, for any reason, it is found that I am not entitled to payments I receive as a result of this claim or I receive duplicate payment, I will return the funds to the Arizona Department of Revenue within 15 days of demand. I swear and attest that all claims, assertions and signatures made in this claim are true and material and that all photocopies I have or will provide are the same as the original documents. Furthermore, I swear and acknowledge that any false statement made in this claim subjects me to penalties related to perjury and the subornation of perjury.

Claimant's Signature ▲ **Date ▲**

Claimant's Signature ▲ **Date ▲**

STATE OF _____

SUBSCRIBED AND Sw ORN BEFORE mE THIS _____ DAy OF _____ (NOTARy S EAl)

20_____, By:

PRINT NAME OF SIGNOR **NOTARY PUBLIC**

For assistance in the Phoenix area: (602) 364-0380 or outside the Phoenix area toll free: (877) 492-9957
Fax: (602) 542-2089 • www.azunclaimed.gov

ARIZONA FORM
600A

Arizona Department of Revenue
Claim for Unclaimed Property - Original Owner

This form should only be used to claim property of which you are the original owner.
If you are claiming property as the heir or beneficiary of a deceased owner (Form 600B), the agent of an entity (Form 600C) or the agent of a living owner (Form 600D), you must complete the appropriate form.

YOU ARE REQUIRED TO SUBMIT THE FOLLOWING EVIDENCE WITH THIS FORM:

✓ **You must provide a clear copy of official photo identification or have your signature on the claim form notarized.**
If your name has changed since the property was reported to the State of Arizona, you must provide verification of your name change. The Arizona Unclaimed Property Section does not release funds based on name similarity alone. You must also provide a social security number or address match. If only one identifier is known to the State of Arizona Department of Revenue, you are required to prove that identifier. Please see our website www.azunclaimed.gov if you would like examples of acceptable proof.

✓ **Please provide proof of your social security number.**
Providing your Social Security number (SSN) is optional. However, if you choose not to provide your SSN, there may be insufficient information available to determine whether you are the owner of the unclaimed property held by the Section and in some cases may result in your claim being denied. If you provide your SSN, the Section will only disclose it to employees involved in paying your claim and to the federal government as required by law.

✓ **Please provide proof that you lived at or received mail at the address reported to the State of Arizona as the last known address of the original owner.**
If you do not know what address was reported to the State of Arizona, you can complete an inquiry at www.missingmoney.com or you can contact our customer service hotline at (602) 364-0380 / 1-877-492-9957.

✓ **Joint owners must file together** unless:

- One of the owners is deceased. In this case, a copy of the joint owner's death certificate is required.
- The owners are now divorced. In this case, a certified copy of the divorce decree and complete property settlement are required.
- The owners have lost contact. In this case, a notarized statement that confirms that the owners had no marital relationship, have lost contact and each listed owner is entitled to an equal portion of the property is required.

Please be aware that each claim is unique and that once your claim is received, the Section may need to request additional information from you to support your claim. If this is the case, the Section will contact you by telephone or in writing to explain the additional requirement and will allow you an opportunity to provide the additional evidence rather than denying your claim. If you have any questions or cannot provide the evidence requested, we recommend that you complete the claim form and submit the evidence you can provide along with a note explaining your circumstances. A claims specialist may be able to clarify and assist you with the evidence requirement.

Form Instructions

1 In this section, please provide the property ID if known or a brief description of the property you are claiming. You are also asked to provide the name, address and tax ID number as reported by the business or entity that remitted your property to the State of Arizona (if known).

2 In this section, please provide us with your current or correct name and contact information.

3 In this section, please read the declarations carefully. You must sign and date the form. If there are joint owners, they must also sign the claim form (see evidence requirements above for all joint owner exceptions).