
**CITY OF PETALUMA, CA
UNCLAIMED MONEY – CLAIM FORM**

Pursuant to California Government Code Section 50052, I wish to file a claim for a previously unclaimed check in the amount of \$_____ that was published in the Petaluma Argus Courier on _____. The grounds on which I file this claim are:

Individual or Vendor Name (Printed)

Individual or Vendor Name (Signature)

Telephone Number

Street Address

City/State/Zip Code

For Finance Department Only

Name of Payee _____ GL Account No _____

Replacement Check No. _____ Check Date _____ Check Amount _____

Original Check or Reference No. _____ Date _____ Amount _____

Proof of Identity Verified:

Driver's License ___ Other _____

Verified By _____ Date _____

Approved By _____ Date _____

Rejected By _____ Date _____

Reason for Rejection _____

**CITY OF PETALUMA, CA
UNCLAIMED MONEY CLAIM FORM - FILING INSTRUCTIONS**

STEP #1 Complete all required fields on the Unclaimed Money Claim Form:

- Amount
- Newspaper notice date
- Grounds for filing claim
- Payee full individual name or business name
- Signature
- Daytime phone number
- Mailing address
- Mailing city, state and zip code

STEP #3 Mail the completed claim form and attachments to:

City of Petaluma Finance Department
ATTN: Unclaimed Funds
11 English Street
Petaluma, CA 94952