CITY OF COLLEGE STATION
the heart of the Research Valley

Unclaimed Property Claim Form

Name of Claimant: _____

Current Mailing Address: _____

_____

_____

Daytime Phone: _____

Driver's License #: _____ Issuing State:_____

Property #_____ Amount: $_____

I certify that the information provided above is true and correct.

Signature: _____ Date:_____

The following documents must be sent along with the claim form for the claim to be considered complete and valid.

Proof of ID: Copy of Driver's License or copy of Social Security Card or student ID

Proof of ownership: Copy of Utility bill, canceled check, or other document related to property being claimed

Mail completed form and attachments to:

City of College Station
Attn: Rocio Cortez- Accounting Division
P.O. Box 9973
College Station, TX 77842-9973