



SOUTH CAROLINA OFFICE OF STATE TREASURER
ANNUAL REPORT OF UNCLAIMED PROPERTY
REPORT YEAR _____

HOLDER NAME _____
HOLDER ADDRESS _____
Check here if this is a new address
HOLDER FEIN _____
HOLDER CONTACT NAME _____
PHONE NUMBER _____ EMAIL ADDRESS _____
Remittance amount \$ _____

NOTE: Attach the Remittance Information Form with the emailed report.

I, _____, CERTIFY THAT I HAVE CAUSED TO BE PREPARED AND HAVE EXAMINED THIS REPORT AS TO PROPERTY PRESUMED ABANDONED UNDER THE SOUTH CAROLINA UNCLAIMED PROPERTY LAW FOR REPORT YEAR _____, THAT I AM DULY AUTHORIZED TO EXECUTE THIS VERIFICATION BY THE HOLDER AND BY LAW AND THAT I BELIEVE THAT SAID REPORT IS TRUE, CORRECT, AND COMPLETE AS OF THIS DATE. THIS REPORT TOTALS # _____ PROPERTIES FOR \$ _____ AND # _____ SHARES.

Date _____ Signature _____ Title _____

Signed before _____

On the _____ of _____ 20 SEAL My commission expires: _____
