FORM LIP-1 SUMMARY REPORT

REPORTS AND REMITTANCE are due November 1

of each reporting year for the property listed that is unclaimed as of the preceding June 30th:



DAVID MCRAE STATE TREASURER

STATE OF MISSISSIPPI **UNCLATMED PROPERTY REPORT**

David MCRAE

State Treasurer

REPORT YEAR______Date of this report______Federal ID #_____ Name of Holder: Contact Person Mailing Address Phone

Fax

City, State, Zip

Years qualified to do business in Mississippi

In compliance with the Mississippi Uniform Disposition of Unclaimed Property Act the above holder hereby reports the following property subject to the Act for the period ending June 30: Funds held and owing which have remained unclaimed and unpaid and presumed abandoned, as reported in detail on the attached forms, amounting in total to \$

E-Mail address

AFFIDAVIT

Ι,

State of _____ County/City of _____

(Type in name of officer, owner, etc., signing) (Type in title of person signing) of the company, or holder, for which this report is made, being duly sworn (or affirmed) according to law do depose and

say that this report is true and contains all facts required by law to be reported.

Signature of officer, owner, etc.

Sworn to (or affirmed) and subscribed before me this ______day of ______, _____,

MAIL REPORT & CHECK PAYABLE TO:

> State Treasurer of Mississippi **Unclaimed Property Division** P.O. Box 138 Jackson, MS 39205-0138

Type of Business

FILE THIS COPY ON OR BEFORE NOVEMBER 1 WITH FORM UP-2

(Notary Public)

FORM UP-2				Pageof
To: State Treasurer of Mississippi Unclaimed Property Division 501N.West St., Ste 1101 Jackson, MS 39205-0138		STATE OF MISSISSIPPI UNCLAIMED PROPERTY REPORT		HOLDER INFORMATION: Name of Business Street Address City, State, Zip Code Contact Phone
PROPERTY DESCRIPTION & IDENTIFYINGNUMBER	STREE STATE, 2 (1	ST NAME, FIRST NAME ADDRESS CITY, IP CODE COUNTY F KNOWN) CALLY BY LAST NAME	OWNER SOCIAL SECURITYNUMBER	DATE OF LAST TRANSACTION OR DATE PROPERTYBECAME PAYABLE / RETURNABLE
TILE THIS COPY ON OR BEFORE NOVEMBER 1 WITH FORM UP-1 NOTE: ITEMS LESS THAN \$100.00 MAY BE REPORTED IN AGGREGATE				TOTAL