



City of Solana Beach Request for Unclaimed Checks

Warrant/Check Number	Amount
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By signing this request the undersigned claimant certifies under penalty of perjury, by the laws of the State of California, that claimant is the owner of said unclaimed check and is the person entitled to receive the money set forth in the claim. The claimant agrees to indemnify and hold harmless the City of Solana Beach, its officers, employees, and agents from any loss resulting from the payment of said claim.

The claimant also certifies the check was not endorsed, cashed, transferred, or lawfully seized, and the claimant cannot find the check because it was lost or destroyed. As the claimant, you acknowledge and understand the City of Solana Beach will cancel the check listed above, causing it to be non-negotiable when a replacement check is delivered.

If you want to claim these funds, you must complete all of the information below, sign the letter, and return it to us. If we are not in receipt of the letter with all of the required information, **according to the California Government Code Section 50050-50056, the unclaimed funds will be returned to the City's General Fund after required publication.**

Each Claimant Must Sign This Affirmation Or The Claim Will Be Returned

Full Name or Business Name				Social Security No./Taxpayer I.D.	
Street Address		City	State	Zip	Email Address
Daytime Phone	Signature Required				Date

Please note that your signature must be notarized if the claim amount is over \$1000.00

PLEASE ALLOW 90 DAYS TO PROCESS YOUR REQUEST FOR A REPLACEMENT CHECK FROM THE DATE WE RECEIVE YOUR COMPLETED FORM.

Send completed affirmation to:

City of Solana Beach, Finance Department
Unclaimed Checks Claims Processing
635 South Highway 101
Solana Beach, CA 92075