



**CITY OF LOS ALTOS
UNCLAIMED PROPERTY-CLAIM FORM**

*Return completed form to:
City of Los Altos
Attn: Finance Department, AP
1 N San Antonio Road
Los Altos, CA 94022*

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 Los Altos Town Crier on _____. The grounds on which I file this claim are as follows:

Vendor or Individual Name (printed) Taxpayer I.D. or Social Security Number

Vendor or Individual Name (signature) Telephone Number

Address City/State/Zip Code

FOR FINANCE DEPARTMENT USE ONLY

Name of Payee: _____ Original Check Amount: _____

Original Check #: _____ Original Check Date: _____

Replacement Check #: _____ Replacement Check Date: _____

Replacement Check Amount: _____ Account Code: _____

Verified by: _____ Date: _____