

SUPERIOR COURT OF CALIFORNIA, COUNTY OF SAN MATEO

CLAIM FOR MONEY HELD FORM

Date:			
Owner's Name (as issued on original check):			
Issuance Date (s):			
Amount of Total Claim:			
Claimant's Name*:			
*Must match the name on Claim Affirmation Form.			
Relationship of Claimant to Owner:			
Reason for Claim (e.g., never received check, lost check):			
Claim Type (please check one of the boxes):			
☐ Reissue to same name and address on original check			
☐ Reissue to same name but different address than on original check			
☐ Other (e.g., deceased owner claim)			
AFFIRMATION AND SIGNATURE (by claimant)			
I hereby affirm, under penalty of perjury, that I am duly authorized to make said claim upon the Superior Court of California, County of San Mateo. I hereby agree to indemnify and hold harmless the State, the Court, its officers and employees from any loss, including attorney fees, incurred as a result of payment of the amount claimed. I agree to submit to the Court's jurisdiction and I agree to participate in any litigation or dispute resolution process regarding any dispute from this claim.			
Signature: Date:			
COURT'S USE ONLY			
☐ Approved, Paid to Claimant Shown Above Date: ☐ Denied, Reason: By:			

SUPERIOR COURT OF CALIFORNIA, COUNTY OF SAN MATEO

CLAIM AFFIRMATION FORM

Under penalty of perjury, the undersigned claimant has read the claim and knows the contents thereof and the claimant is the owner of the said claim and the person entitled to receive the money set forth in said claim. The claimant agrees to indemnify and hold harmless the State, the Court and its agents, officers, and employees from any loss resulting from the payment of said claims.

CURRENT INFORMATION AND SIGNATURE MUST BE PROVIDED OR YOUR CLAIM WILL NOT BE PROCESSED

Claimant's Information:

First Name:	Middle Name or Initial:		
Last Name:			
Name of Business:			
Current mailing address: _			
City:	State / Province:	Zip Code:	
Country:			
Daytime Phone:	Email ac	ddress:	
Date:			
Claimant or Authorized As	gent Signature		