

Date:_____

Address:_____

Our records show an uncashed check or refundable deposit belonging to the person(s)/business whose name appears above. Per state laws on unclaimed monies, the City of Burbank will escheat payments to the general fund that are three years or older. This will be processed 30 days from the date of this letter. To request a check reissued, please complete the form below, and sign and return this letter in its entirety to City of Burbank Financial Services Department, 301 E. Olive Ave., Burbank, CA 91502.

Check Number:	Date of Check:	Amount: \$	
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The check will be reissued only to the person/business name listed above. Complete the form below and choose a course of action. Return the entire letter, and any documentation applicable if requesting the check be paid to a different entity than shown above.

PLEASE SIGN BELOW AND RETURN THE ENTIRE NOTICE

SIGNATURE:			DATE:
Print Name			
Phone Number			
Current Address:			
City:	State:	Zip:	_

ACTION TO BE TAKEN:

Reissue the check and mail it as it was originally addressed.

Reissue the check to my current address. (If you select this action, you will need to contact the Financial Services at 818-238-5500 and request a Payee Registration Form to update your address in our system.)

Do not reissue the check.