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# State of Michigan Department of Treasury Unclaimed Property Division

# Manual for Reporting Unclaimed Property

Revised May 2011

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3167, Michigan Inventory Report of Unclaimed Property Safe Deposit Box Contents

3165, Michigan Holder Request for Refund

3277, Michigan Claim for Refund of Unclaimed Property

# GLOSSARY

**Abandoned Property** Tangible or intangible property that is unclaimed by its rightful owner.

Activity Action taken on property by the owner which may include making a deposit, a

withdrawal of money, a written memorandum to the holder, or any action that

state statute deems adequate.

The State Treasurer Administrator

**Apparent Owner** The person whose name appears on the records of the holder as the person

entitled to property held, issued, or owing by the holder.

**Attorney General** The chief legal officer of this State.

**Banking Organization** A bank, trust company, savings bank, industrial bank, land bank, safe deposit

company, private banker, or any organization defined by law as a bank or

banking organization.

A nonpublic corporation, joint stock company, investment company, business **Business Association** 

trust, partnership, or association for business purposes of two or more individuals, whether or not for profit, including a banking organization,

financial organization, insurance company, or utility.

Domicile The state of incorporation of a corporation, or the state of the principal place of

business of an unincorporated person.

**Due Diligence** The effort required by statute that a holder of abandoned property must use to

find the true owner of the property, before the holder reports the property to

the state.

**Dormant Period** The time when an owner of property does not take action on his or her

property (see activity).

**Dormancy Date/Date** 

of Last Activity

The date of last contact by the owner with the listed holder.

Escheat A transfer of property from a holder, making the state the legal custodian of

the property.

**Financial Organization** A savings and loan association, cooperative bank, building and loan

association, savings bank, or credit union.

Holder A person, wherever organized or domiciled, who is in possession of property

belonging to another, a trustee, or is indebted to another on an obligation.

### **Insurance Company**

An individual, association, corporation, fraternal or mutual benefit organization, or any other legal entity, whether or not for profit, that is engaged or attempting to engage in the business of making insurance or surety contracts.

### **Intangible Property**

Includes all of the following: money, checks, drafts, deposits, interest dividends, and income; credit balances, customer overpayment, gift certificates, security deposits, refunds, credit memos, unpaid wages, unused airline tickets, and unidentified remittances; stocks and other intangible ownership interest in business associations; money deposited to redeem stocks, bonds, coupons, and other securities, or to make distributions; amounts due and payable under the terms of insurance policies; amounts distributable from a trust or custodial fund established under a plan to provide health, welfare, pension, vacation, severance, retirement, death, stock purchase, profit sharing, employee savings, supplemental unemployment insurance, or similar benefits.

### **Last Known Address**

A description of the location of the apparent owner, sufficient for the purpose of the delivery of mail.

### Owner

A depositor, in the case of a deposit: a beneficiary, in the case of a trust other than a deposit in trust, creditor, claimant, or payee, in the case of other tangible property; or a person having a legal or equitable interest in property subject to this act. Owner includes the legal representative of the person defined as an owner in the subdivision.

### Person

An individual, business association, state, or other government, governmental subdivision agency, public corporation, public authority, estate, trust, two or more persons having a joint or common interest, or any other legal or commercial entity.

### **Property**

Tangible or intangible personal property owned by a person.

State

Any state, district, commonwealth, territory, insular possession, or any other area subject to the legislative authority of the United States.

### **Tangible Property**

Includes items in safe deposit boxes.

**UPD** 

**Unclaimed Property Division** 

### **Unclaimed Property**

Tangible or intangible property that is unclaimed by its rightful owner.

### **Underlying Shares**

Shares of stock issued by a business association, banking organization, or financial organization; certificates which are in the possession of the shareholders who have failed to either cash dividend checks, correspond with the issuing corporation, or respond to the issuing corporation's attempts to make contact. In other words, an underlying share of stock is an ownership interest in a business entity, the certificate, or other evidence of which is presumably in the possession of the missing owner.

### Utility

A person who owns or operates for public use any plant, equipment, property, franchise, or license for the transmission of communications or the production, storage, transmission, sale, delivery, or furnishing of electricity, water, steam or gas.

# **NOTICE TO HOLDERS**

Michigan's Unclaimed Property program is governed by the Michigan Uniform Unclaimed Property Act (Public Act 29 of 1995, as amended). The program is administered by the Michigan Department of Treasury and it serves as the State of Michigan's central depository for abandoned and unclaimed property. The Michigan State Treasurer is the administrator of the Uniform Unclaimed Property Act and acts as custodian of the property on behalf of the owner.

Every business or government agency holding unclaimed property belonging to someone whose last known address is in Michigan must report. If the holder is incorporated in Michigan and the owner's address is unknown, then the holder must report those properties to Michigan.

This manual has been prepared to help organizations file unclaimed property reports. It does not address legal issues relating to unclaimed property, nor does it describe all types of property that must be reported. However, it will provide instructions for reporting the most common types of unclaimed property.

Thank you for your cooperation and your continued support in our mutual goal to reunite unclaimed property to the rightful owner or heir.

# **Filing Deadline**

The unclaimed property report is due July 1, 2011. Extensions will not be granted to holders that cannot meet the July 1, 2011 filing deadline.

# **Penalty and Interest Provisions**

Section 35 of the Uniform Unclaimed Property Act contains penalty and interest provisions. Interest will be charged for holder reports filed after the July 1 due date and for individual properties contained in the holder report which, in accordance with the applicable dormancy period, should have been reported and remitted in prior years. Should Treasury determine that a holder report and/or individual properties contained therein were filed late, Treasury will notify the holder in writing of the interest being charged. The holder will have 30 days to remit the amount due. Also see Chapter 1, "Fines and Penalties" for more information.

### **UPD Contact Information**

For questions regarding this manual, or the responsibility of a holder of unclaimed property, contact UPD by calling (517) 636-6940, or writing to the following address:

Unclaimed Property Division Michigan Department of Treasury P.O. Box 30756 Lansing, MI 48909

# WHAT'S NEW

# **Due Date Change**

Beginning in 2011, the due date for the annual unclaimed property report (holder report) will change from November 1 to July 1 for property reaching its dormancy period as of March 31.

# **Changes to Dormancy Periods**

The dormancy period for most property types has been shortened to three years. Unclaimed property reaching the new dormancy periods as of March 31, 2011 must be reported and remitted to the State on or before July 1, 2011. For a complete listing of all property types and dormancy periods, refer to Appendix A.

# **Attestation of Compliance with Unclaimed Property Reporting (Form 4305)**

Entities having no unclaimed property reportable under the Uniform Unclaimed Property Act must complete Form 4305 and file it with the Michigan Department of Treasury by July 1, 2011. Form 4305 is available on the Internet at www.michigan.gov/unclaimedproperty.

# **Reporting Media**

CD-ROM is the preferred reporting media for submitting Holder Reports. Paper reporting is allowed **only** if reporting fewer than ten properties for the entity each year. Filing on diskette will continue to be accepted for 2011 reporting, but we encourage holders to take steps to upgrade their technology to allow for CD-ROM reporting in future years.

# **New Telephone Number**

The new holder contact telephone number is (517) 636-6940. The telephone number for claiming property is (517) 636-5320.

### **Worthless Securities**

Do not report and remit worthless securities as unclaimed property.

# **CHAPTER 1**

# **GENERAL INFORMATION**

# **How to Use This Manual**

This manual has been prepared to help organizations file unclaimed property reports. It does not address legal issues relating to unclaimed property, nor does it describe all types of property that must be reported. However, it will provide instructions for reporting the most common types of unclaimed property. A list of "Frequently Asked Questions" about the unclaimed property program is also available on the Internet at <a href="https://www.michigan.gov/unclaimedproperty">www.michigan.gov/unclaimedproperty</a>.

The manual is divided into three chapters.

| Chapter 1: General Information         | Overview of unclaimed property reporting.   |
|--|---|
| Chapter 2: Reporting Specific Property | Description of more common types of unclaimed property, and others requiring extra care, like securities. |
| Chapter 3: Preparing Your Report       | Step-by-step instructions for filing the property report.   |
| Appendix                               | Various codes, abbreviations, standards, and samples.   |
| Forms                                  | Samples of various holder forms.  |

# Where to Get Help

For questions or problems, write or call Unclaimed Property Division (UPD) at:

Unclaimed Property Division Michigan Department of Treasury P.O. Box 30756 Lansing, MI 48909

(517) 636-6940

# **Reporting Methods**

This manual contains instructions for the use of CD-ROM, diskette, or paper reporting. Use one of the following types of media to report unclaimed property to Michigan.

**1. CD-ROM.** All holders reporting ten or more unclaimed property accounts must report on CD-ROM. See Chapter 3, "Instructions for Reporting on Magnetic Media."

- **2. Diskette.** Reporting on diskette will continue to be accepted for 2011 reporting, but holders are encouraged to take steps to upgrade technology to allow for CD-ROM reporting in future years. See Chapter 3, "Instructions for Reporting on Magnetic Media."
- 3. Paper. Use this method only if reporting fewer than ten properties for the entity each year. Blank forms provided in this manual may be photocopied. Even if fewer than ten properties to report, UPD encourages holders to report on a CD-ROM. When using any type of commercial software to report, the holder must send the electronic file on a CD-ROM. Paper copies of reports that are not filed on the *Michigan Annual Report of Unclaimed Cash and/or Safe Deposit Boxes* (Form 1223) will not be accepted

# **Holder Reporting Software (HRS)**

HRS is available at www.michigan.gov/unclaimedproperty to assist holders in reporting unclaimed property to the State of Michigan.

# **Reporting Information and Requirements**

The State of Michigan requires businesses and government agencies who have unclaimed property to remit and file unclaimed property reports annually with the State Treasurer. Information from these reports will be used to compile a list of persons who own unclaimed property and to pay claims. The report will be the basis for UPD's advertising and public information campaign to locate missing owners.

All holders remitting property must complete a *Michigan Holder Transmittal Annual Report of Unclaimed Property* (Form 2011). This form provides information to UPD about the holder. It establishes a reporting history and provides information about the report being filed (e.g., amount of report, shares of stock reported). See Chapter 3 for completing Form 2011.

# **Reporting Format**

Reports must be in the National Association of Unclaimed Property Administrators (NAUPA) electronic reporting standard format. Reports received in the wrong format cannot be processed, will be returned to the holder, and will be considered **not** filed timely.

### **Report and Remit**

All holders are required to remit the property when they file their reports. The amount on Form 2011 must equal the amount of the report. Include a check payable to the "State of Michigan" for the total amount remitted with the report.

### **Attestation of Compliance with Unclaimed Property Reporting (Form 4305)**

Entities having no unclaimed property reportable under the Uniform Unclaimed Property Act must complete Form 4305 and file it with the Michigan Department of Treasury by July 1, 2011. Form 4305 is available on the Internet at <a href="https://www.michigan.gov/unclaimedproperty">www.michigan.gov/unclaimedproperty</a>.

# **Notice to Owners-Due Diligence**

Michigan law requires holders to send written notice to owners at their last known address informing them that they hold property subject to being turned over to the State. This requirement only applies if all of the following conditions exist:

- 1. The address for the owner does not appear to be inaccurate.
- 2. The property has a value of \$50 or more.
- 3. The statute of limitation does not bar the claim of the owner.

Notice must be sent not less than 60 days, nor more than 365 days, before the filing of the report. See the Appendix for samples of due diligence letters.

### Mail Not Returned by Post Office

Mail not returned to holder by the post office does not, by itself, qualify as a contact with the owner or activity on the account. When reviewing records for unclaimed property, look for the last documented communication or other contact with the owner or the last debit or credit generated by the owner on any account. Other methods of verifying the whereabouts of owners are:

- 1. Cross-referencing records to show that the individuals have other active accounts within the organization.
- 2. Signed W-9 forms, change of address notices, or other correspondence from customers that prove they are aware the property exists.

### **Unknown Owners**

For property where the owner is not known, enter "unknown" in the Last Name field. List any descriptive or identifying information in the Property Description field.

### **Consolidated Reports**

Michigan does accept consolidated reports. A consolidated report is one that is filed on behalf of more than one legal holder (e.g., a parent company that files one report for itself and a number of subsidiaries).

### **Record Keeping**

Copies of reports and supporting records must be kept for ten years. Information on the unclaimed property report must be supported by an adequate audit trail.

# **Incomplete Reports**

Check the report before submitting it to ensure all requested information has been provided. An incomplete report is not considered filed timely.

# **Aggregate Reporting**

Holders may report a group of accounts each valued at less than \$50 using one of nine available aggregate codes. List the number of properties for each type of property. Below is an example of the two most commonly used aggregate codes:

| 15 | AC99 (Aggregate Savings Account)  | Aggregate Total |
|----|-----------------------------------|-----------------|
| 10 | CK99 (Aggregate Unclaimed Checks) | Aggregate Total |

If the account is interest bearing, list all like interest amounts with the applicable property type.

| 15 | AC99 (Savings Account) | Interest 3% | Aggregate Total |
|----|------------------------|-------------|-----------------|
| 15 | AC99 (Savings Account) | Interest 4% | Aggregate Total |

**Do not** combine different interest rates in the same property type.

Special rules apply when reporting dividends. See Chapter 2 for reporting securities and securities-related cash.

Holders are encouraged to provide UPD with the separate detail list of owner names and amount due each owner for the aggregate properties. This will reduce the need for UPD to refer the owner back to the holder for verification.

# **Early Reporting**

Section 28 of the Unclaimed Property Act allows a holder to report and remit property after two years of dormancy. Refer to the act for conditions that must be present to remit unclaimed property early.

### **Fines and Penalties**

Every holder is required to file and remit property within the time prescribed. Any holder who fails to file a report of unclaimed property is subject to the following fines and penalties as provided in the Uniform Unclaimed Property Act, Public Act 29 of 1995 (Michigan Compiled Law (MCL) 567.221 et seq.):

- A person who fails to pay or deliver property within the time prescribed by the act shall pay interest at the current monthly rate of one percentage point above the adjusted prime rate, per year, per month, on the property or value of the property, from the date the property should have been delivered.
- A person who willfully fails to render any report or perform other duties required under the act shall pay a civil penalty of \$100 for each day the report is withheld or the duty is not performed, but not more than \$5,000.
- A person who willfully fails to pay or deliver property to the administrator, as required under the act, shall pay a civil penalty equal to 25 percent of the value of the property that should have been paid or delivered.

• A person who willfully refuses after written demand by the administrator to pay or deliver property to the administrator, as required under the act, is guilty of a misdemeanor and upon conviction may be punished by a fine of not less than \$500, nor more than \$25,000, or imprisonment for not more than six months, or both.

### **Additional Forms**

Blank forms provided with this manual may be photocopied. Forms are also available on the Internet at www.michigan.gov/unclaimedproperty.

### **Claims Process for Holders**

The main objective of UPD is to reunite owners or heirs with their lost or forgotten funds. UPD's goal is to process claims in less than 90 days.

When UPD processes a claim, proof provided by a claimant is compared with owner information and property descriptions provided by the holder. When preparing the report, assume each owner listed is a potential claimant. It is **essential** that all available information that identifies owners and properties is listed on the report. Social Security numbers (SSN), last-known address, property descriptions, and account or check numbers are items used to verify ownership during the claim process. Providing this and other descriptive information on your report will reduce the need for UPD to contact the holder for more information during the claim process.

UPD may contact the holder for clarification or more information where ownership of the account is uncertain.

### Filing for Reimbursement and Refunds

There are two types of payments UPD will make to holders after unclaimed property has been remitted. The most common type is a reimbursement, the second is a refund.

**Reimbursement.** In this process, a holder decides to pay an owner and then files a claim with UPD for reimbursement. UPD encourages holders to use the reimbursement process for their customers. UPD makes every effort to respond to requests as quickly as possible. The requirements for obtaining reimbursement are:

- 1. Completing and filing *Michigan Holder Request for Refund* (Form 3165).
- 2. Attaching proof of payment for each owner paid and listed on the holder reimbursement form (a copy of the cleared item like original cashier's check with the endorsement of the owner or proof that the account was reactivated).

After UPD receives a reimbursement request and proof of payment to the owner, a refund is mailed to the holder in about two to four weeks.

**Refunds.** Refunds are made when holders overpay on an unclaimed property report. The overpayments are usually due to accounting errors or other mistakes.

To file for a refund, complete Form 3165. Provide proof or explanation of how the error was made. A refund will be mailed to a holder in approximately two to four weeks.

# **How an Owner May File a Claim**

If a search for unclaimed property on Treasury's Web site reveals an individual's name or company name or an individual has reason to believe the UPD is holding funds which belong to him or her, the individual should file an *Unclaimed Property Inquiry* (Form 3433).

The law requires UPD to verify the claim. The documentation required varies with the type and amount of property being claimed and whether the claimant is an owner, an heir, or an officer of a company. UPD will research a name and process a claim at no charge for the owner.

Holders are encouraged to reimburse the customer or reactivate an account and file with UPD for a reimbursement. If your company does not allow this, please assist the customer by completing a *Claim for Refund of Unclaimed Property* (Form 3277). Instruct the customer to mail the claim form to the Michigan Department of Treasury and attach a copy of the customer's Social Security card and current driver's license. More information may be required to prove ownership before a refund will be issued.

**Note:** UPD cannot provide personalized claim forms to third parties; UPD must deal directly with the claimant

# Recommended Timeline for Unclaimed Property Review

| March 31                  | Identify properties that could be reportable as unclaimed property as of March 31.   |
|---------------------------|--|
| April 15                  | Prepare and mail due diligence letters to those property owners identified as inactive.  |
| May 15                    | Determine property owners with whom contact has not occurred (i.e., returned mail, no response, etc.).   |
| June 1                    | Begin preparing the annual unclaimed property report using reporting software. A free version of the software may be downloaded at <a href="https://www.michigan.gov/unclaimedproperty">www.michigan.gov/unclaimedproperty</a> located in the Reporting Unclaimed Property section.  |
| On or<br>Before<br>July 1 | Mail the electronic media containing the annual unclaimed property report, <i>Michigan Holder Transmittal for Annual Report of Unclaimed Property</i> (Form 2011) and remittance to the Unclaimed Property Division. If your entity has no unclaimed property to report, complete and return the <i>Attestion of Compliance with Unclaimed Property Reporting</i> (Form 4305). |

### If Help Is Needed

For assistance with or questions about preparing the unclaimed property report for remitting property, write or call:

Unclaimed Property Division Michigan Department of Treasury P.O. Box 30756 Lansing, MI 48909 (517) 636-6940

# **CHAPTER 2**

# REPORTING SPECIFIC PROPERTY

# **Uncashed Checks**

Most unclaimed property holders have uncashed checks. The period of abandonment for these items varies from one to three years and begins on the date of the last contact with the payee, which in most cases is the date the check was issued.

Below are the property types and dormancy periods which describe the more common types of unclaimed checks. Also included is the additional information the holder should provide in the Property Description field.

|  | Field        | Dormancy |   |
|--|--------------|----------|---|
| <b>Property Types</b>                    | Descriptions | Period   | Additional Information                                      |
| Cashiers Check                           | CK01         | 3 years  | Two owner's; purchaser and payee                            |
|  |              |          | (remitter and payee)  |
| Wages, Commissions                       | MS01         | 1 year   | Dates of employment   |
|  | MS02         | 1 year   |   |
| Dividends                                | SC01         | 3 years  | Issue name of security                                      |
|  | TR02         | 3 years  |   |
| Customer Overpayment                     | MS05         | 3 years  | Account number  |
| Utility Refunds                          | UT03         | 3 years  | Service address, account number                             |
| Certificate of Deposit                   | CK16         | 3 years  | CD account number   |
| Interest Checks                          |              |          |   |
| Refunds Due                              | MS11         | 3 years  | Account number  |
| Payments for Goods or                    | MS04         | 3 years  | Invoice number  |
| Services, Vendor Checks                  | CK13         | 3 years  |   |
| Pension Checks                           | CK11         | 3 years  | Employer name if different from reporting holder            |
| Escrow Accounts Held by<br>Title Company | TR04         | 3 years  | File number, property address                               |
| Insurance Claim Checks                   | IN01         | 3 years  | Claim number, name of insured,                              |
|  | IN02         | 3 years  | policy number (if death benefit, list beneficiary as owner) |

# **Property Reported by Financial Institutions**

# **Certificates of Deposit (CDs)**

The dormancy period for a matured CD is three years. The dormancy begins the day after the first maturity of the certificate (i.e., the day after the end of the first term). Thus, CDs must be reported three years from the dates the owners were first able to recover funds without penalties.

### **Automatically Renewable CDs**

An automatically renewable CD is considered unclaimed after 15 years. The 15-year dormancy period begins at the first maturity in the absence of depositor contact. For example, in the absence of depositor contact, the dormancy period of an automatically renewable two-year account issued in April 2006 would begin in April 2008. The account would be renewed every two years until the 15-year dormancy period was reached.

Do not report an account until after the period during which there are owner penalties for early withdrawal has expired. If an owner contact is established during renewal term, the dormancy period will run from the date of such contact.

# IRAs, Keoghs, and 401K Plans

An IRA (Individual Retirement Account) account, Keogh plan, or 401K plan becomes distributable under the terms of the account or plan. If the plan or account requires a distribution at a certain point in time, then the three-year dormancy period begins at that point.

# **Custodian Accounts**

Accounts held in trust for a minor or accounts opened under the Uniform Gift to Minors Act (MCL 554.451 et seq.) are considered unclaimed after three years. Also see "Personal Trust Property" below.

**Reminder:** If deposit owners have other active accounts with a financial institution or the financial institution has other contact with deposit owners, the inactive accounts may not be reported or remitted.

### **Personal Trust Property**

Trust properties should list the name of the trust as the primary owner. For accounts held under the Uniform Gift to Minors Act (UGMA), the dormancy period varies with type of property that is being reported. The child should be listed as the UGMA owner and the parent should be listed as the custodian.

If trust properties being held are securities related, see page 2-5 for reporting securities. Report any personal trust properties that are not securities related the same way as other properties.

# **Corporate Trust Property and Paying Agent Accounts**

Corporate trust property and paying agents accounts are considered unclaimed after three years. File separate reports for each issue of stock and provide each issuing company's federal employer identification number (FEIN). This requirement does not apply to bearer bonds.

Follow all other requirements for reporting securities-related property. See page 2-5 for reporting securities.

## **Unclaimed Loan Collateral**

Unclaimed loan collateral is considered unclaimed after three years. This period begins on the date the loan was paid in full. There are three criteria for collateral to be reported as unclaimed:

- 1. The loan has been paid in full or charged off.
- 2. There has been no customer contact for three years.
- 3. The owner's whereabouts are unknown.

When reporting unclaimed loan collateral, use of one of two property type codes. For tangible property set aside for a loan, use property type code "SD03." Examples of tangible property are jewelry, stock certificates, deeds, etc. See page 2-8 for reporting safe deposit or safekeeping property.

Code loan collateral reported as cash with a property type code "MS13." Examples of cash loan collateral are savings accounts and CDs. When reporting this type of property, the following information is required:

- 1. Collateral receipt number
- 2. Loan number
- 3. Description of collateral (e.g., issuing bank and the number of the CD; bank name and account number for the bank account).

The owner of the property is the person or entity who pledged the loan. If the loan was in the name of a person or entity other than the owner of the collateral, enter the loan name in the description field of the report.

# Property Reported by a Court, Governmental Agency, or Public Corporation or Authority

The dormancy period is one year for any type of unclaimed property held by a court, state, or other government, governmental subdivision or agency, public corporation, or public authority. This includes bonds issued by government agencies and entities. Unclaimed child support payments reported by county Friend of the Court offices should be reported using property type code "CT06."

# **Escrow Funds Reported by Title Companies**

Escrow accounts are considered unclaimed after three years.

Escrow balances include accounts where money is held because of the nonperformance of the conditions of the escrow agreement. In transactions involving earnest money, both the buyer and seller have an undivided interest in the entire amount. Both the buyer and seller are considered the owners and both should be listed on the report. Report the person who placed the money in escrow, usually the buyer, as primary owner; list the other parties as additional owners.

If the contract stipulates that the seller may claim the funds under specific conditions and documenting evidence in your file indicates that those conditions exist, the seller is considered the owner and is listed on the report. The buyer is not considered an owner in this instance.

If the holder has contact with one party, but a release cannot be secured from the other party, report the funds three years from the date of last contact with the missing party or date of scheduled closing.

## **Other Escrow Funds**

Report amounts placed in escrow at closing in the name of the party who provided the funds. For example, part of a seller's payoff is held to ensure all taxes are paid and repairs are complete. Once these conditions are met, if the funds remain unclaimed, report the seller's name as the owner of the funds. The buyer is not entitled to the funds.

Report escrow funds using code "TR04."

# **Insurance-Related Property**

Insurance-related property is considered unclaimed after three years. Unclaimed properties must be assigned property type codes. The choice of codes is important because it determines what kind of information will be required from claimants. Review the following list to determine which code to use. Each property type describes what information is required when remitting these funds

| Code | Description   |
|------|---|
| IN01 | Individual policy benefits or claim payments. Provide name of insured, policy   |
|      | number, and claim number if applicable.   |
| IN02 | Group policy benefits or claim payments excluding death benefits. Provide       |
|      | employer names and policy numbers and claim numbers if applicable.              |
| IN03 | Death benefits on individual or group policies. Provide name of insured, policy |
|      | number, claim number, and date of birth of insured, if known.                   |
| IN04 | Proceeds from matured policies, endowments, or annuities. Provide policy number |
|      | and name of insured.  |
| IN05 | Premium refunds on individual policies. Provide policy number and name of       |
|      | insured.  |
| IN06 | Unidentified remittance or premium payments. Provide any information available; |
|      | report owner's name as "unknown."   |

| IN07 | Other amounts due under policy terms. All other insurance-related property not    |
|------|---|
|      | described above. Provide a complete description of the property.                  |
| IN08 | Agent credit balances. Provide Social Security number (SSN) of agent and dates of |
|      | employment.   |
| IN99 | Aggregate properties under \$50.  |
|      |   |

# **Reporting State of Michigan Property**

If the owner of the property is listed as a Michigan State agency (e.g., Department of Transportation), enter the owner name as "State of Michigan," then enter the agency name (e.g., Transportation, Attorney General, etc.).

### **Securities and Securities-Related Cash**

CD-ROM reporting is the preferred media to use if securities or securities-related cash is being reported. See Chapter 3 "Preparing Your Report," Instructions for Reporting on Magnetic Media

If paper reports are filed, complete the *Report of Unclaimed Securities* (Form 3164) and/or *Annual Report of Unclaimed Cash and Safe Deposit Boxes* (Form 1223). Instructions for completing the forms are in Chapter 3.

# **General Rules for Reporting**

Regardless of the media selected for reporting securities-related property, observe the following rules:

- 1. Do not report and remit worthless securities.
- 2. Provide each issue's Committee on Uniform Securities Identification Procedures (CUSIP) number.
- 3. List minor children as primary owners of properties on UGMA accounts. List the trustee/custodians as additional owners.
- 4. List owners who are owed more than one amount of the same property type only once (e.g., four quarterly dividend payments). Combine all the amounts due the owner during the applicable reporting period into one total. Provide the ending date through which the amounts were payable. **Do not** report dividends in aggregate.
- 5. If reporting bearer bonds or unclaimed interest on the bonds, list the owners of the properties as "unknown." Provide complete descriptions of the bonds in the applicable fields or boxes. Descriptions must include the issue name, series, bond number, and all outstanding coupon numbers.
- 6. If reporting dividends received in nominee name, list the stock issues in the description fields or boxes. List the nominee name as the owner of the property.

- 7. Provide the amounts and issue names of any outstanding shares (e.g., still in the possession of the shareholders) when reporting underlying, unexchanged, unredeemed, or unsurrendered shares.
- 8. If remitting underlying shares or undelivered shares returned by the post office (RPO shares), or both, combine all shares of the same issue and class. The report, however, must reflect the number of underlying shares and the number of shares which are RPO for each of the owners.

## **Determining What Property to Report**

The dormancy period for stock and dividends is three years. The shares of stock should be escheated if the following two conditions apply:

- 1. The shareholder, for more than three years, has not claimed a dividend, distribution, or other sum payable, or has not communicated in writing with the holder.
- 2. The holder does not know the location of the shareholder at the end of the three-year period.

The return of official shareholder notifications or communications by the postal service as undeliverable is evidence the holder does not know the location of the shareholder.

At the time the shares of stock are escheated, any dividend, distribution, or other sum held for or owing to the shareholder should also be escheated.

### **Property Type Codes and Property Descriptions**

Assign a property type code to each property listed on your report. The choice of codes is important because it determines what kind of information is required of a claimant. Descriptions of some of the more frequently used codes are below. See Appendix A for a complete list.

| Code | Securities-Related CASH Code Description  |
|------|---|
| SC01 | Cash dividends. Include the issue name of the security in the Description field.  |
| SC02 | Registered bond interest due an owner of a registered corporate security. <b>Do not</b> use this code to report interest paid on a bearer bond.   |
| SC03 | Registered bond principal due an owner of a corporate-issued bond.  |
| SC07 | Municipal bond interest and matured principal. List the owner as "unknown" if reporting a bearer bond. Provide a complete description, including issue name, series, bond number, and all outstanding coupon numbers. Also provide the total cash amount of unclaimed interest and principal in the Cash Amount Remitted field.           |
| SC09 | Cash for fractional shares. Provide the issue name of the security in the Description field or box. <b>Do not</b> report liquidation proceeds under this code. Use the "SC13" code for liquidation proceeds.  |
| SC13 | Liquidation or redemption proceeds (cash only). List the issue name of the liquidated security and number of shares presumed to be in the possession of the shareholder in the Description field. <b>Do not</b> complete the Shares Remitted field. Provide the total cash amount due each shareholder in the Cash Amount Remitted field. |

| SC20 | Credit balances due missing owners. |
|------|-------------------------------------|
|      |                                     |

# **Stock and Bond Codes**

| Code | Description   |
|------|---|
| SC08 | Undelivered shares that are returned by the post office (RPO shares). These shares are normally the result of a stock split or stock dividend. Include the issue name of the security in the Description field.   |
| SC10 | Unexchanged shares resulting from a merger or buy-out. Provide the number of shares of the successor corporation in the Shares Remitted field. These are the shares that will be remitted to UPD with the report. Indicate the issue name of the successor corporation's stock and the unexchanged stock in the Description field.                                    |
|      | <b>Example:</b> XYZ Corporation merged into ABC Corporation.  |
|      | One share of XYZ is exchangeable for ¼ share of ABC.  |
|      | An owner fails to exchange 100 shares of XYZ.   |
|      | The 25 shares of ABC (unexchanged) are outstanding and presumed to be in the possession of the owner.   |
|      | If there is a claim. UPD will request the 100 unexchanged shares of XYZ from the owner before releasing the 25 shares of ABC.   |
| SC12 | Underlying shares. The shares are presumed to be in the possession of the shareholder. The certificates must be canceled on the books of the issuer and reissued to the State Treasurer. Provide the issue name and number of underlying shares held by the owner. Report all cash and stock dividends payable on the underlying shares as of the date of remittance. |

# <u>Securities Registration and Mailing Instruction/Guidelines</u> <u>for all Holders Reporting Securities</u>

It is very important that these instructions are followed when submitting a report and securities to UPD so receipt can be verified.

Although the securities will be transferred to a different location, they must be transferred at the same time the report and cash are mailed to UPD.

# **Stocks**

A DTC (Depository Trust Company) transfer is required for delivering all DTC-eligible securities. A DTC transfer is performed by depositing shares to DTC 0954 for credit to account AUZF0241702, Agent Bank 26017. Where a security is not DTC-eligible and physical certificates are being delivered, the stock certificates must be registered in the State of Michigan's nominee name of "Spartans & Co.," Tax ID number 30-0187543.

At least one day in advance of a DTC deposit, fax the following information concerning the deposit to (617) 722-9660, Attn: Custody Department. Questions can be directed to the State Client Liaison at (617) 722-9674.

State of MI "#AUZF0241702" Name of Security: CUSIP number: Holder's DTC number: Number of Shares:

If sending physical certificates, mail the certificates with the unclaimed property report to:

Michigan Department of Treasury Unclaimed Property Division P.O. Box 30756 Lansing, MI 48909

# **Dividend Reinvestment Plans (DRPs)**

The preferred method of handling DRPs is to liquidate all reported shares and include a check for all proceeds with the report.

If DRP shares cannot be liquidated for some reason, DRPs are to be transferred into the name of the Michigan Department of Treasury using tax ID number 38-6000134. The account statements showing the transfer of shares to the Michigan Department of Treasury should be sent together with the holder report to:

Michigan Department of Treasury Unclaimed Property Division P.O. Box 30756 Lansing, MI 48909

### **Mailing the Remittance Report**

Mail report and a check payable to the "State of Michigan" for the total amount of cash reported to the following address:

Michigan Department of Treasury Unclaimed Property Division P.O. Box 30756 Lansing, MI 48909

If any questions, call (517) 636-6940.

# Mutual Fund Shares, Distributions, and Checks

CD-ROM reporting is preferred to use if securities or securities-related cash are being reported. See Chapter 3, "Preparing Your Report," Instructions for Reporting on Magnetic Media.

If paper reports are filed, complete the *Report of Unclaimed Securities* (Form 3164) and/or *Annual Report of Unclaimed Cash and Safe Deposit Boxes* (Form 1223). Instructions for completing the forms are included in Chapter 3.

**SC16** Mutual Fund Shares

**SC01** Dividends

### **Identifying Unclaimed Shares**

The dormancy period begins when either a sum payable is unclaimed or the first time a piece of mail is returned by the post office (RPO). Determine the date of the first RPO event and use this date. Note that this may be different than what is on the holder's information system. At the time the shares become unclaimed, the entire account and any cash proceeds due the owner are also considered unclaimed. Report shares using property type code "SC16" and the cash proceeds as credit balances with property type code "SC20."

# **Identifying Unclaimed Distribution and All Other Checks**

Mutual fund companies may also hold unclaimed income or capital gains distributions for various reasons. Distribution proceeds may not have been reduced to check form. If a check was issued, it may have never been reported. Checks for closed accounts may be outstanding or RPO'd and should be reported as credit balances, using property type code "SC20."

# **Registration Instructions for Mutual Funds**

Mutual funds shares must be transferred to an account held by the State of Michigan at the same time the report and cash are mailed to UPD. Documentation verifying the transfer must be attached to the report.

**Preferred Method.** Mutual Fund accounts held for the State of Michigan should be registered in the name of "MAC & CO" and transferred into Michigan's custodial account with ACS. Ensure a detailed list is e-mailed 48 hours in advance to *upch.custody@acs-inc.com* or contact Marsela Strakosha at (617) 371-9914.

The list should contain:

- · CUSIP number
- Fund name
- Share account
- Account number at the fund.

**Note:** It is important the registration references account number AUZFO241702. This is what identifies the fund as belonging to the State of Michigan.

MAC & CO State of Michigan Mutual Fund Operations P.O. Box 3198 Pittsburgh, PA 15230-3198

Account Number: AUZF0241702 FEIN Number: 25-1536944

If, for some reason, mutual fund shares cannot be transferred as indicated above, an account must be established at the fund with the following registration:

**Note:** The account statement must be sent together with the holder report.

Michigan Department of Treasury Unclaimed Property Division P.O. Box 30756 Lansing, MI 48909

FEIN: 38-6000134

### **Mailing the Remittance Report**

Mail report and a check payable to the "State of Michigan" for the total amount of cash reported to the following address:

Michigan Department of Treasury Unclaimed Property Division P.O. Box 30756 Lansing, MI 48909

# Safe Deposit Boxes or Safekeeping Property

Report all unclaimed property with an unknown or missing owner after three years. The three-year dormancy period begins on the date of the last contact with the property owner. For example, a safe deposit box is considered unclaimed and must be reported three years after the last rental payment that was not paid. If the owner has other active accounts at the institution or there is other evidence of owner contact, do not report owner's property.

Report safe deposit box contents, safekeeping, and other tangible property on CD-ROM/diskette or paper reporting forms. **Do not** combine these property types on the same reports or CD-ROM/diskette with other types of intangible property, such as checking or savings accounts.

# **Safekeeping and Other Tangible Property**

Safekeeping items (not safe deposit contents) may be items being held for an owner whose whereabouts is unknown or for a deceased person's heirs. Items may include personal property from a prisoner or personal effects from a hospital patient. Unclaimed property may also include items being held as collateral or as a convenience for a customer. It might include stock

certificates, insurance policies, deeds, wills, or tangible items like a ring or silver tea set. **Do not** value safekeeping items.

Use one of these two property type codes for this kind of tangible property:

SD02 Safekeeping

**SD03** Other tangible property

# **Safe Deposit Box Contents**

Many safe deposit boxes are empty when drilled. To avoid unnecessary work, holders are encouraged to drill the boxes before preparing their report. **Do not report empty boxes.** The property type code for safe deposit boxes is "SD01."

# **Preparing Inventory**

Describe each safekeeping item and the contents of each safe deposit box using *Report of Unclaimed Property Safe Deposit Boxes* (Form 3167) or an authorized bank inventory form. Include two copies of the inventory form for each box (one copy in each box and one copy attached to the Holder Transmittal form with the detailed form or CD-ROM/diskette). Be certain to complete **all** entries on the form so contents can be recorded properly. UPD encourages holders to keep a copy of the inventory for their records in case the owner should contact them.

When the itemized description of contents is completed, list each item according to these categories (**do not** put in a paragraph format):

| Categories                     | Description   |  |  |  |  |
|--------------------------------|---|--|--|--|--|
| Papers of Value                | For life insurance policies, deeds, wills, funeral agreements, cemetery contracts, purchase agreements for land, powers of attorney, partnership agreements, checking or savings books with a balance left, uncashed checks, pawn shop tickets, etc.  |  |  |  |  |
| Securities                     | Include descriptions of stocks, bonds, and other securities (e.g., the registered owner's name, issuing company, number of shares, etc.).   |  |  |  |  |
| Cash                           | List coins by denomination. Normal looking currency should be converted to a bank cashier's check payable to the State of Michigan and submitted with the other safe deposit box contents. Unusual or distinctive currency should be remitted with the rest of the box's contents. Note on the inventory sheet that the cash has been converted to a check. |  |  |  |  |
| Jewelry                        | When describing jewelry or loose stones, describe the gems by color (e.g., gold tone ring with small blue stone).   |  |  |  |  |
| Other Miscellan-<br>eous Items | Include other property not included in the above categories (e.g., baseball cards, gold/silver ingots, stamp collections, etc.).  |  |  |  |  |

| Firearms and | The local law enforcement agency must be contacted if firearms or            |  |  |  |  |
|--------------|--|--|--|--|--|
| Controlled   | controlled substances are found in safe deposit boxes. <b>Do not</b> send    |  |  |  |  |
| Substances   | firearms to UPD. The local law enforcement agency should confiscate          |  |  |  |  |
|              | controlled substances and any live ammunition. Make a note on the            |  |  |  |  |
|              | inventory sheet explaining the items were found but turned over to the local |  |  |  |  |
|              | law enforcement agency.  |  |  |  |  |

# Examples of property UPD will accept are:

- Money (coins, coin collections)
- Jewelry (costume or valuable)
- Antiques, rate items (in good condition)
- Silver and/or gold items (gold tooth crowns)
- Miscellaneous items (stamp and baseball collections, bicentennial commemorative medals)
- Tool sets or power tools in reasonable and working condition
- Electrical equipment (working units determined saleable)
- Papers, including but not limited to, military records, identification documents, Social Security cards, passports, original travelers checks or money orders, legal documents (e.g., birth, adoption, or death records; wills; court papers; mortgage papers; or abstracts).

As a safety precaution, any items of value that are covered with bodily fluids must be cleaned before packaging for shipping to Treasury.

Place each box or safekeeping item in an individual envelope. Label each envelope with the owner's name, box number (if a safe deposit box), and holder's name. Place the original **typed** inventory inside the corresponding envelope. Attach a copy of the inventory to the report.

Place the labeled envelopes in a shipping container. Label the outside of each container with the box numbers contained within (e.g., Bag 1 of 3; Boxes 210,515, 600; Bag 2 of 3; Box 615, 700, 725; Bag 3 of 3; Box 726, 890, 920; etc.).

### Examples of property UPD will **not** accept are:

- Clothing
- Toiletries, personal care items, dentures (unless they contain gold fillings)
- Any food or alcoholic beverages
- Loose tools or keys
- Fireworks, explosives
- Weapons of any type, including guns or ammunition (turn these over to the local authorities)
- Controlled substances (turn these over to the local authorities)
- Used toy cap guns, balls, etc., that have a value less than cost of sale
- Drug paraphernalia (drugs, pipes, needles, etc.) (turn these over to the local authorities)
- Incidental items (paper clips, rubber bands, scrap paper, etc.)
- Purses or wallets (excluding important papers)
- Papers (e.g., credit cards, blank checks, personal correspondence, and pictures)
- Cremated remains.

Items listed that will not be accepted or that are believed worthless may be disposed of and so noted on the inventory sheet by the holder.

# Guidelines for Preparing the Report for Safe Deposit Boxes or Safekeeping Property

The separate inventory sheets discussed above are the only place safe deposit box contents and safekeeping property should be itemized. When the *Annual Return for Unclaimed Property* (Form 1223) is completed, include only the information requested on that form. Leave the amount field blank. The Description field should state "safe deposit box."

# **Report Requirements**

Your tangible unclaimed property report should include the following:

- 1. Michigan Holder Transmittal (Form 2011)
- 2. Michigan Annual Report of Unclaimed Cash and Safe Deposit Boxes (Form 1223) to be used for reports of under ten boxes.

or

CD-ROM/diskette in National Association of Unclaimed Property Administrators (NAUPA) format - to be used for reports of ten boxes or more.

3. Inventory Report of Unclaimed Property: Safe Deposit Box Contents (Form 3167) or an authorized bank inventory form (one copy attached to transmittal form and one copy within each box).

Courier service is recommended when property has significant value (holders must contact UPD to confirm a delivery date or when sending a large shipment). Property with a smaller value should be sent via Federal Express or United Parcel Service (UPS). Do not send tangible property by U.S. Mail.

Following is the mailing address for Federal Express, UPS, or Armored Truck deliveries (do not use this address for U.S. Mail deliveries):

Michigan Department of Treasury Unclaimed Property Division 7285 Parsons Drive Dimondale, MI 48821 (517) 636-6940

Keep a copy of the inventory sheets and the report for business records.

### **Abandoned Vehicles Auction Proceeds**

Net proceeds from the sale of abandoned vehicles in accordance with Section 252g of the Michigan Vehicle Code (Public Act 300 of 1949) are to be escheated to UPD. The holder (towing company or police department) shall report and remit payment together with a copy of the completed Abandoned Vehicle Bill of Sale (Michigan Department of State Form TR-52).

# **Gift Certificates/Gift Cards**

The Unclaimed Property Act was amended through Senate Bill 388 of 2008, in which a gift certificate or gift card that does not charge an inactivity fee and has an expiration date greater than five years is not subject to escheat. This legislation was passed together with changes to the Consumer Protection Act pertaining to gift certificates and gift cards (please refer to Public Acts 209, 210, and 211 of 2008 for further details).

# CHAPTER 3

# PREPARING YOUR REPORT

# Instructions for Reporting on Magnetic Media

Holder reports containing more than ten properties must be filed on a CD-ROM/diskette. Reports must be in the NAUPA standard electronic reporting file format.

The Holder Reporting System (HRS), available at www.michigan.gov/unclaimedproperty, is a free software package for creating unclaimed property reports on electronic media for submission to the Michigan Department of Treasury. Holders using HRS need to update to the current version each year.

Holders wishing to use other software can obtain the NAUPA standard electronic file format at either www.wagers.net or www.naupa.org.

Holder reports filed using HRS are automatically encrypted. UPD recommends holder reports filed using other software be encrypted.

# Instructions for Reporting Cash and Safe Deposit Boxes on Paper

If reporting more than ten accounts, submit report on CD-ROM or diskette.

Holders reporting on paper forms must complete the *Annual Report of Unclaimed Cash and Safe Deposit Boxes* (Form 1223). **Do not** report securities on this form. For securities, use the *Annual Report of Unclaimed Securities* (Form 3164). All forms needed for paper reporting are provided with this manual. The forms may be photocopied.

- 1. Page Number. Number all detail sheets (e.g., 1 of 3, 2 of 3, 3 of 3).
- **2. Holder Name**. Enter the name of the company or institution that is reporting. Do not use any punctuation (periods, commas, apostrophes, etc.). If the name of the company starts with the word "the," place it at the end (e.g., The Smith Company should read Smith Company The). Do not abbreviate the first word of the company name (e.g., American vs. Amer., National vs. Natl). Do not use numbers in the Holder Name field. The word "First" should never be abbreviated as "1<sup>st</sup>." Exceptions can be made when a number is a part of a company logo or registered trademark (e.g., A1 Inc. or 84 Lumber). Company names containing initials should have spaces between the initials (e.g., J J Reynolds vs. JJ Reynolds).
- **3. Holder Branch Number.** If any other departments or branches of the organization file unclaimed property reports using the same tax ID number entered on holder's report, contact UPD to receive a branch number. The branch number will be used to direct questions to the correct reporting department/branch. If the business files only one report, enter "00." See Chapter 1, "General Information," for UPD's telephone number.

- **4. Holder Federal Employer Identification Number.** Enter the nine-digit FEIN assigned by the federal government. If the FEIN is not known, contact the company's payroll, accounting, or tax department.
- **5. Holder Report Year.** Enter the four-digit year in which the property is being reported. Michigan's report period ends March 31, 2011, so the holder report year would be 2011.
- **6. Holder Report Number.** If this is the first report filed by the holder for the report year, enter "01." If multiple reports are filed under the same FEIN and extension during the year, increase this number by one for each additional report.

# 7. Properties:

- A. Property Description. Describe the type of property being reported (e.g., checking or savings account, IRS, etc.).
- B. Property Type Code. This field is **required**. The property type code distinguishes one property type from another. Select four-character code that best describes the original property of the missing owner from Appendix A. For example, a closed savings account converted to check form would still be reported as a savings account ("AC02").

**Note:** Enter a property type code even if reporting in aggregate or for unknown owners. See Chapter 2, "Reporting Specific Property for Aggregate and Unknown Owners."

C. Owner's Name. Enter the owner's last name, first name, and middle initial or the company name if it is a business. If the additional owner is a business, enter the business name exactly as adopted except when the first word is "The." If the name of the company starts with the word "the," place it at the end (e.g., The Smith Company should read Smith Company The). Do not abbreviate the first word of the company name (e.g., American vs. Amer., National vs. Natl). Do not use numbers in the Holder Name field. The word "First" should never be abbreviated as "1st." Exceptions can be made when a number is part of a company logo or registered trademark, such as A1 Inc. or 84-Lumber. Company names containing initials should be with spaces between them (e.g., J J Reynolds vs JJ Reynolds). If the owner of the property is listed as a state agency in Michigan (e.g., Department of Transportation), enter the owner name as "State of Michigan," then enter the agency (e.g., Transportation, Attorney General, etc.).

Enters the owner's suffix or title last (e.g., Jr., Sr., III, Dr., Rev.). See Appendix F for suggested owner title abbreviation. This field may be left blank.

Enter the owner's last known address. The last known address must be listed even if the mail has been returned by the post office. When establishing whether the claimant is the rightful owner, confirmation of this address is very important. If the owner's street address is unknown, leave blank. **Do not** fill with "unknown" or "address unknown."

Enter the city of the last known address of the owner. If the owner's last known address is not in the United States, list the province, etc. If the owner's city is unknown, leave blank. **Do not** fill with "unknown" or "city unknown."

Enter the standard two-character postal abbreviation of the owner's state of last known address. See Appendix B for state abbreviations.

Enter the owner's five- or nine-digit zip code. If only a five-digit zip code, leave the last four blank.

If a property is owned by more than one person, see "Additional Owners" below.

- D. Owner Type. Enter "P" to denote primary owner information.
- E. Additional Owners. If the property has more than one owner, enter the second owner's name in item 7C below the primary owner's name. Enter the last name, first name, middle initial of the owner; and the last known address, relationship code, and SSN or FEIN. Enter "cont'd" in the Amount field. Continue until all owners for this property are listed.

**Note:** Corresponding relationship codes must be entered for each additional owner in item 7D. The owner type code indicates who must claim the property. See Appendix C for relationship codes (e.g., for a life insurance policy the policy holder would be the primary owner and the beneficiary of the policy would be the additional owner with a relationship code of "BF.")

- F. Owner Tax Identification Number. Enter the owner's SSN or the company's FEIN. When establishing ownership, the SSN/FEIN is very important. This number will not be released as public information but will be used for identification.
- G. Deductions. This applies to safekeeping and safe deposit box contents only. Report safekeeping fees and liens. Enter the type of fee and/or lien and the amount. This amount is **not** deducted from the amount remitted. List "DR" for drilling fees and unpaid rent.
- H. Date of Last Activity. Enter the date on which the last deposit/withdrawal occurred; the date the mail was returned; or the date on which the property became payable, redeemable, or returnable (e.g., issue date of a check).

If reporting property with periodic payments, such as oil and gas royalties or commission checks, enter the ending date through which the amounts were payable. Total all amounts due the owner during the applicable time period and list the payments as one amount.

I. Identifying Number. List any information that will help identify the owner of the property. Enter identifying numbers, such as check number, account number, policy number, or cashier's number.

- J. Quantity. Enter the total number of items being reported for this owner. If reporting aggregates under \$50, refer to Chapter 1, "Reporting Information and Requirements," Aggregate Reporting.
- K. Interest Bearing. Enter the applicable interest rate at the time the property is reported. Enter as a percentage (e.g., 3%).
- L. Amount Remitted. Enter the cash amount remitted on behalf of the missing owner. List owners who are owed more than one amount of the same property type only once on the report, with all the amounts combined into one total. If reporting property in aggregate or unknown owners, total each property type and enter that amount.

Enter the total amount remitted for this page only in the bottom-right corner.

8. **Totals.** Complete this item **only** on the last page of the report. Enter the total remitted for this report.

Complete the *Michigan Holder Transmittal* (Form 2011). Prepare a check payable to the "State of Michigan" for the total amount due. Mail report and remittance on or before July 1.

Keep a copy of this report for company records.

# **Instructions for Reporting Securities on Paper**

If reporting more than ten accounts, submit report on CD-ROM or diskette.

If reporting securities-related property, review the following instructions for a better understanding of the information that must be included with the property report. Use only the *Annual Report of Unclaimed Securities* (Form 3164) to report securities-related property. See Chapter 2, "Reporting Specific Property," for registration and delivery requirements for securities and mutual funds.

- 1. Page Number. Number all detail sheets (e.g., 1 of 3, 2 of 3, 3 of 3).
- 2. Holder Name. Enter the name of the company or institution that is reporting. Do not use any punctuation (periods, commas, apostrophes, etc.). If the name of the company starts with the word "The," place it at the end (e.g., The Smith company should read Smith Company The). Do not abbreviate the first word of the company name (e.g., American vs. Amer., National vs. Natl). Do not use numbers in the Holder Name field. The word "First" should never be abbreviated as "1st." Exceptions can be made when a number is a part of the company logo or registered trademark (e.g., A1 Inc. or 84 Lumber). Company names containing initials should have spaces between the initials (e.g., J J Reynolds vs. JJ Reynolds). If the owner of the property is listed as a state agency in Michigan (e.g., Department of Transportation) enter the owner name as "State of Michigan," then enter the agency (e.g., Transportation, Attorney General, etc.).
- **3. Holder Branch Number.** If any other departments or branches of the organization file unclaimed property reports using the same FEIN entered on the report, contact UPD to receive a branch number. The branch number will be used to direct questions to the correct

- reporting department/branch. If the business files only one report, enter "00." See Chapter 1, "General Information," for UPD's telephone number.
- **4. Holder Federal Employer Identification Number.** Enter the nine-digit FEIN assigned by the federal government. If not familiar with the holder's ID number, contact the company's payroll, accounting, or tax department.
- **5.** Holder Report Year. Enter the four digits of the year in which the property is being reported. For example, Michigan's report period ends March 31, 2011, so the holder report year would be 2011.
- **6. Holder Report Number.** If this is the first report filed by the holder for the report year, enter "01." If multiple reports are filed under the same FEIN and extension during the year, increase this number by one for each additional report.
- 7. **Properties.** When reporting stock where the owner has different issues and these issues will be due the owner, there should be an owner record for each issue that will be due that owner. For example, Paul Smith had an account with XYZ Broker. In the account, Mr. Smith owned 12 shares of ABC Office Supply common, four shares of ABC Office Supply \$2.75 preferred, and 20 shares of After School Snack Company common. There should be three property records for Mr. Smith.
  - A. Issue Name. Enter the name of the security issue, which is due the owner. **Do not** enter more than one issue per owner record (i.e., brokers must provide one property record for each issue held in an owner's account). If this is redemption, this field should contain the name of successor. Make sure to indicate the type of stock if it is other than common.
  - B. Property Type Code. This field is **required**. The property type code distinguishes one property type from another. Select the four-character code that best describes the original property of the missing owner from Appendix A. See Chapter 2, "Securities and Securities-Related Cash," for more information.
  - C. Owner's Name. Enter the owner's last name, first name, and middle initial or the company name if it is a business. If the additional owner is a business, enter the business name exactly as adopted except when the first word is "The." If the name of the company starts with the word "The," place it at the end (e.g., The Smith Company should read Smith Company The). Do not abbreviate the first word of the company name (e.g., American vs. Amer., National vs. Natl). Do not use numbers in the Holder Name field. The word "First" should never be abbreviated as "1st." Exceptions can be made when a number is part of a company logo or registered trademark, such as A1 Inc. or 84 Lumber. Company names containing initials should be with spaces between them (e.g., J J Reynolds vs. JJ Reynolds). If the owner of the property is listed as a state agency in Michigan (e.g., Department of Transportation), enter the owner name as "State of Michigan," then enter the agency (e.g., Transportation, Attorney General, etc.).

Enter the owner's suffix or title last (e.g., Jr., Sr., III, Dr., Rev.). See Appendix F for suggested owner title abbreviation. This field may be left blank.

Enter the owner's last known address. The last known address must be listed even if the mail has been returned by the post office. When establishing whether the claimant is the rightful owner, confirmation of this address is very important. If the owner's street address is unknown, leave blank. **Do not** fill with "unknown" or "address unknown."

Enter the city of the last known address of the owner. If the owner's last known address is not in the United States list the province, etc. If the owner's city is unknown, leave blank. **Do not** fill with "unknown" or "city unknown."

Enter the county name of the owner's last known address, the holder's branch location, or principal place of business in the reporting state. If the county name is unknown, leave blank. See Appendix D for a listing of county abbreviations.

Enter the standard two-character postal abbreviation of the owner's state of last known address. See Appendix B for state abbreviations.

Enter the standard two-character postal abbreviation of the owner's state of last known address. See Appendix B for state abbreviations.

Enter the owner's five- or nine-digit zip code. If only a five-digit zip code, leave the last four blank.

D. Additional Owners. If the property has more than one owner, enter the second owner's name in item 7C below the primary owner's name. Enter the last name, first name, and initial of the owner; and the last known address, owner type, and SSN or FEIN. Enter "cont'd" in the Continued field. Continue until all owners for this property are listed.

**Note:** A corresponding owner type must be entered for each additional owner in item 7D. The owner type code indicates who must claim the property. See Appendix C for relationship codes.

- E. Owner type. Enter "P" to denote primary owner information.
- F. Owner Tax Identification Number. Enter the owner's SSN or the company's FEIN. When establishing ownership, the SSN/FEIN is very important. This number will not be released as public information but will be used for identification.
- G. Stock CUSIP Number. Enter the CUSIP number of the security issue named in item 7A which is due the owner (e.g., what is being reported to Michigan).
- H. Date of Last Activity. Enter the date on which the property became payable or redeemable (e.g., issue date of the dividend check or exchange date of a security), or the date any kind of documentable contact was made with the owner.
- I. Property Description. Enter the type of property being reported (e.g., stock common, capital debenture, warrant, bonds, etc.). List bond coupon numbers here.

- J. Number of Shares. Enter the number of shares which is being remitted for the owner (i.e., the total number of shares remitted for the owner for this issue).
- K. Original Certificate Number. Enter the original certificate number of the security that was issued to the owner if known; otherwise, leave blank.
- 8. **Totals.** Complete this item **only** on the last page of the report. Enter the total remitted for this report.

Complete the *Michigan Holder Transmittal* (Form 2011). Prepare a check payable to the "State of Michigan" for the total amount due. Mail report and remittance on or before July 1. Be sure to check amount and/or shares remitted match the grand total(s) on report.

See Chapter 2, "Securities and Securities-Related Cash," for registration and delivery instructions.

Keep a copy of this report for company records.

# **Instructions for Completing the Holder Transmittal**

The Michigan Holder Transmittal (Form 2011) must be filed annually by all holders remitting property. Attach this form to the CD-ROM/diskette or paper reports (Annual Report of Unclaimed Cash and Safe Deposit Boxes (Form 1223) or Annual Report of Unclaimed Securities (Form 3164)). Also attach payment for the property which is identified as unclaimed. The transmittal provides information to UPD about the company or institution and will serve as a guideline for the report.

Complete transmittal form using the following instructions.

- 1. Holder Report Year. Enter the four-digit year in which the property is being reported. For example, Michigan's report period ends March 31, 2011, so the holder report year would be 2011.
- **2. Holder Name.** Enter the name of the company or institution being reported. Do not use any punctuation (periods, commas, apostrophes, etc.). If the name of the company starts with the work "The," place it at the end (e.g., The Smith Company should read Smith Company The). Do not abbreviate the first word of the company name (e.g., American vs. Amer., National vs. Natl). Do not use numbers in the Holder Name field. The word "First" should never be abbreviated as "1st." Exceptions can be made when a number is part of a company logo or registered trademark, such as A1 Inc. or 84 Lumber. Company names containing initials should be with spaces between them (e.g., J J Reynolds vs. JJ Reynolds). If the owner of the property is listed as a state agency in Michigan (e.g., Department of Transportation), enter the owner name as "State of Michigan," then enter the agency (e.g., Transportation, Attorney General, etc.).
- **3. Holder Federal Employer Identification Number.** Enter the nine-digit FEIN assigned by the federal government. If not familiar with the FEIN, contact the organization's payroll, accounting, or tax department.

- **4. Holder Branch Number.** If any other departments or branches of the organization file unclaimed property reports using the same FEIN entered on the report, contact UPD to receive a branch number. The branch number will be used to direct questions to the correct reporting department/branch. If the business files only one report, enter "00." See Chapter 1, "General Information," for UPD's telephone number.
- **5. Holder Address.** Enter the mailing address.
- **6. Holder Incorporated State.** Enter the two-character postal abbreviation of the state in which the company is incorporated. Savings and loan associations, banks, and credit unions should enter the state in which they were chartered. See Appendix B for standard state postal abbreviations.

# 7. Holder Incorporated Date:

- A. HOLDER-INC-DATE-CCYY (four-digit year)
- B. HOLDER-INC-DATE-MM (two-digit month)
- C. HOLDER-INC-DATE-DD (two-digit day)

Enter the date (CCYYMMDD) on which the company was incorporated or licensed to do business. Savings and loan associations, banks, and credit unions should enter the date their organization was chartered.

**8. Holder City, State, and ZIP Code.** Enter the name of the city in which the corporate headquarters is located or primary place of business for the FEIN noted above.

Enter the name of the state in which the corporate headquarters is located or primary place of business for the FEIN above. Enter the valid postal two-character abbreviation of the holder's state. See Appendix B.

Enter the five- or nine-character ZIP Code. If only using the first five positions, leave the last four positions blank.

- **9. Holder County.** Enter the name of the county in which the corporate headquarters is located or primary place of business for the FEIN noted above.
- **10. Holder Report Number.** Check the appropriate box.
- 11. "Did You Exercise Due Diligence for This Report Year?" Check Yes or No.
- **12. State Your Primary Business Activity.** Enter primary business activity of holder (e.g., bank, credit union, insurance, manufacturing, city/county government).
- **13. Annual Sales Premiums.** Enter holder's annual sales for last fiscal year. If reporting as an insurance company, enter the total amount of premiums written last fiscal year.
- 14. Total Assets. Enter the total assets of the company. If none, please explain.
- 15. Number of Employees. Enter total number of employees in the company or institution.

- **16.** "Did You File a Report of Unclaimed Property Last Year?" Check Yes or No. If No is checked, enter an explanation.
- 17. Report Type. Check the appropriate box.
- 18. "What Media Type are you Filing?" Check the appropriate box.
- 19. "Is the Company a Wholly-owned Subsidiary, a Division, Publicly Traded or Private?" Check the appropriate box.
- 20. Reporting Requirements. Complete each line according to the instructions on the form.
- **21. Contact Person.** Enter the name of the person responsible for the report. This person should be able to answer questions concerning the contents of the report and, in most cases, is the person who compiled the report.
- 22. Authorizing Signature. Must be signed by an officer of the company or institution.
- **23. Title.** Give the title of the person signing the transmittal.
- **24. Date.** The date the transmittal was signed by the authorized person.

### **A**PPENDIX

### **APPENDIX A**

### PROPERTY TYPE CODES AND ABANDONMENT PERIODS

| ACCOU                    | NT BALA             | NCES DUE  | SAFE D  | EPOSIT B     | OXES & SAFEKEEPING   |
|--------------------------|---------------------|---|---------|--------------|--|
| <u>Yrs</u>               | Code                | <u>Description</u>  | Yrs     | Code         | Description  |
| 3                        | AC01                | CHECKING ACCOUNTS   | 3       | SD01         | SAFE DEPOSIT BOX CONTENTS  |
| 3                        | AC02                | SAVINGS ACCOUNTS  | 3       | SD02         | OTHER SAFEKEEPING  |
| 3                        | AC03                | MATURED CD OR SAVINGS CERTIFICATE                                     | 3       | SD03         | OTHER TANGIBLE PROPERTY  |
| 3                        | AC04<br>AC05        | CHRISTMAS CLUB FUNDS MONEY ON DEPOSIT TO SECURE FUND                  | COURT   | DEPOSI       | TC   |
| 3 3                      | AC05<br>AC06        | SECURITY DEPOSITS   | Yrs     | Code         | Description  |
| 3                        | AC07                | UNIDENTIFIED DEPOSITS   | 1       | CT01         | ESCROW FUNDS   |
| 3                        | AC08                | SUSPENSE ACCOUNTS   | 1       | CT02         | CONDEMNATION AWARDS  |
| 15                       | AC10                | AUTOMATIC RENEWABLE CD  | 1       | CT03         | MISSING HEIRS FUNDS  |
| 3                        | AC99                | AGGREGATE ACCOUNT BALANCES UNDER \$50.00                              | 1       | CT04         | SUSPENSE ACCOUNTS  |
| *****                    |                     | 1 CVV   | 1       | CT05         | OTHER COURT DEPOSITS   |
|                          | HED CHE             |   | 1<br>1  | CT06<br>CT99 | CHILD SUPPORT PAYMENTS   |
| $\frac{\mathbf{Yrs}}{3}$ | Code<br>CK01        | Description CASHIER'S CHECKS  | 1       | C199         | AGGREGATE COURT DEPOSITS UNDER \$50.00                           |
| 3                        | CK02                | CERTIFIED CHECKS  | INSURA  | ANCE         |  |
|                          | CK03                | REGISTERED CHECKS   | Yrs     | Code         | Description  |
| 3<br>3<br>3              | CK04                | TREASURER'S CHECKS  | 3       | IN01         | INDIVIDUAL POLICY BENEFITS OR CLAIM                              |
|                          | CK05                | DRAFTS-CHECKS   |         |              | PAYMENTS   |
| 3                        | CK06                | WARRANTS  | 3       | IN02         | GROUP POLICY BENEFITS OR CLAIM PAYMENTS                          |
| 3                        | CK07                | MONEY ORDERS  | 3       | IN03         | PROCEEDS DUE BENEFICIARIES                                       |
| 15<br>3                  | CK08<br>CK09        | TRAVELER'S CHECKS<br>FOREIGN EXCHANGE CHECKS                          | 3       | IN04         | PROCEEDS FROM MATURED POLICIES,<br>ENDOWMENTS OR ANNUITIES       |
| 3                        | CK10                | EXPENSE CHECKS  | 3       | IN05         | PREMIUM REFUNDS  |
| 3                        | CK10<br>CK11        | PENSION CHECKS  | 3       | IN06         | UNIDENTIFIED REMITTANCES   |
| 3                        | CK12                | CREDIT CHECKS OR MEMOS  | 3       | IN07         | OTHER AMOUNTS DUE UNDER POLICY TERMS                             |
| 3                        | CK13                | VENDOR CHECKS   | 3       | IN08         | AGENT CREDIT BALANCES  |
| 3                        | CK14                | CHECKS WRITTEN OFF TO INCOME  | 2       | IN77         | LIMITING AGE POLICIES  |
| 3                        | CK15                | OTHER OUTSTANDING OFFICIAL CHECKS                                     | 3       | IN99         | AGGREGATE INSURANCE PROPERTY UNDER                               |
| 3                        | CK16                | CD INTEREST CHECKS  |         |              | \$50.00  |
| 3                        | CK99                | AGGREGATE UNCASHED CHECKS UNDER \$50.00                               | SECURI  | ITIES        |  |
| IRA AC                   | COUNTS              |   | Yrs     | Code         | Description  |
| Yrs                      | Code                | Description   | 3       | SC01         | DIVIDENDS  |
| 3                        | IR01                | IRA CASH  | 3       | SC02         | REGISTERED BOND INTEREST (CORP.)                                 |
| 3                        | IR08                | IRA STOCKS AND BONDS  | 3       | SC03         | REGISTERED BOND PRINCIPAL (CORP.)                                |
| 3                        | IR13                | IRA MUTUAL FUNDS  | 3       | SC04         | EQUITY PAYMENTS  |
| 3.443.1E.D               | Y DDOGE             | TEDS A MANUEL LA DIFFERENCE   | 3       | SC06         | FUNDS PAID TO PURCHASE SHARES                                    |
|                          |                     | EEDS & MINERAL INTEREST   | 1 3     | SC07         | MUNICIPAL BOND PRINCIPAL AND INTEREST                            |
| <u>Yrs</u><br>3          | <u>Code</u><br>MI01 | Description NET REVENUE INTEREST                                      | 3       | SC08<br>SC09 | SHARES OF STOCK (RETURNED BY P.O.)<br>CASH FOR FRACTIONAL SHARES |
| 3                        | MI02                | ROYALTIES   | 3       | SC10         | UNEXCHANGED STOCK OF SUCCESSOR CORP.                             |
| 3                        | MI03                | OVERRIDING ROYALTIES  | 3       | SC11         | OTHER CERTIFICATES OF OWNERSHIP                                  |
| 3                        | MI04                | PRODUCTION PAYMENTS   | 3       | SC12         | UNDERLYING SHARES OR OTHER                                       |
| 3                        | MI05                | WORKING INTEREST  |         |              | OUTSTANDING CERTIFICATES   |
| 3                        | MI06                | BONUSES   | 3       | SC13         | FUNDS FOR LIQUIDATION/REDEMPTION OF                              |
| 3                        | MI07                | DELAY RENTALS   | 2       | 0.014        | UNSURRENDERED STOCK OR BONDS                                     |
| 3                        | MI08<br>MI09        | SHUT-IN ROYALTIES<br>MINIMUM ROYALTIES                                | 3<br>1  | SC14<br>SC15 | DEBENTURES US GOVERNMENT SECURITIES                              |
| 3                        | MI99                | AGGREGATE MINERAL INTEREST UNDER \$50.00                              | 3       | SC15         | MUTUAL FUND SHARES   |
| 5                        | 1,11))              | AGGREGATE MATERIEST CAPER \$50.00                                     | 3       | SC17         | WARRANTS (RIGHTS)  |
| MISC. C                  | CHECKS &            | & INTANGIBLE PERSONAL PROPERTY  | 3       | SC19         | DIVIDEND REINVESTMENT PLANS                                      |
| <u>Yrs</u>               | Code                | <u>Description</u>  | 3       | SC20         | CREDIT BALANCES  |
| 1                        | MS01                | WAGEŚ, PAYROLL, SALARY  | 3       | SC99         | AGGREGATE SECURITY RELATED CASH UNDER                            |
| 1                        | MS02                | COMMISSIONS   |         |              | \$50.00  |
| 3                        | MS03                | WORKERSÍ COMPENSATION BENEFITS  | TRUCT   | INITECTI     | MENT & ECCDOW ACCOUNTS   |
| 3                        | MS04<br>MS05        | PAYMENT FOR GOODS & SERVICES<br>CUSTOMER OVERPAYMENT                  | Yrs     | Code         | MENT & ESCROW ACCOUNTS  Description                              |
| 3                        | MS06                | UNIDENTIFIED REMITTANCES  | 3       | TR01         | PAYING AGENT ACCOUNTS  |
| 3                        | MS07                | UNREFUNDED OVERCHARGES  | 3       | TR02         | UNDELIVERED OR UNCASHED DIVIDENDS                                |
| 3                        | MS08                | ACCOUNTS PAYABLE  | 3       | TR03         | FUNDS HELD IN FIDUCIARY CAPACITY                                 |
| 3                        | MS09                | CREDIT BALANCES-ACCTS. REC.   | 3       | TR04         | ESCROW ACCOUNTS  |
| 3                        | MS10                | DISCOUNTS DUE   | 3       | TR05         | TRUST VOUCHERS   |
| 3                        | MS11                | REFUNDS DUE   | 3       | TR99         | AGGREGATE TRUST PROPERTY UNDER \$50.00                           |
| 3                        | MS12                | UNREDEEMED GIFT CERTIFICATES  | UTILITI | EC           |  |
| 3                        | MS13<br>MS14        | UNCLAIMED LOAN COLLATERAL<br>PENSION & PROFIT SHARE PLANS (IRA,KEOGH) | Yrs     | Code         | Description  |
| 1                        | MS15                | DISSOLUTION OR LIQUIDATION  | 1       | UT01         | UTILITY DEPOSITS   |
| 3                        | MS16                | MISC. OUTSTANDING CHECKS  | 3       | UT02         | MEMBERSHIP FEES  |
| 3                        | MS17                | MISC. INTANGIBLE PROPERTY   | 3       | UT03         | REFUNDS OR REBATES   |
| 3                        | MS18                | SUSPENSE LIABILITIES  | 3       | UT04         | CAPITAL CREDIT DISTRIBUTIONS                                     |
| 3                        | MS99                | AGGREGATE MISC. PROPERTY UNDER \$50.00                                | 3       | UT99         | AGGREGATE UTILITY PROPERTY UNDER \$50.00                         |

### APPENDIX B

### **STATE ABBREVIATIONS**

| AL | ALABAMA       | NE | NEBRASKA             |
|----|---------------|----|----------------------|
| AK | ALASKA        | NV | NEVADA               |
| AZ | ARIZONA       | NH | NEW HAMPSHIRE        |
| AR | ARKANSAS      | NJ | <b>NEW JERSEY</b>    |
| CA | CALIFORNIA    | NM | <b>NEW MEXICO</b>    |
| CO | COLORADO      | NY | NEW YORK             |
| CT | CONNECTICUT   | NC | NORTH CAROLINA       |
| DE | DELAWARE      | ND | NORTH DAKOTA         |
| FL | FLORIDA       | OH | OHIO                 |
| GA | GEORGIA       | OK | OKLAHOMA             |
| HI | HAWAII        | OR | OREGON               |
| ID | IDAHO         | PA | PENNSYLVANIA         |
| IL | ILLINOIS      | RI | RHODE ISLAND         |
| IN | INDIANA       | SC | SOUTH CAROLINA       |
| IA | IOWA          | SD | SOUTH DAKOTA         |
| KS | KANSAS        | TN | TENNESSEE            |
| KY | KENTUCKY      | TX | TEXAS                |
| LA | LOUISIANA     | UT | UTAH                 |
| ME | MAINE         | VT | VERMONT              |
| MD | MARYLAND      | VA | VIRGINIA             |
| MA | MASSACHUSETTS | WA | WASHINGTON           |
| MI | MICHIGAN      | DC | WASHINGTON DC        |
| MN | MINNESOTA     | WV | <b>WEST VIRGINIA</b> |
| MS | MISSISSIPPI   | WI | WISCONSIN            |
| MO | MISSOURI      | WY | WYOMING              |
| MT | MONTANA       |    |                      |
|    |               |    |                      |

### **APPENDIX C**

### **RELATIONSHIP CODES**

### For sole or first owner

P - Primary

### For additional owners

AD - Administrator GR - Guardian for AF - Attorney for IN - Insured

AG - Agent for JC - Joint tenants in common

AN - And JT - Joint tenants with rights of survivorship AO - And/Or OR - Or

BF - Beneficiary

OR - Or

PA - Payee

CC - Co-Conservator PO - Power of Attorney

CF - Custodian for RE - Remitter
CN - Conservator TE - As Trustee for

EX - Executor or Executrix UG - Uniform gift to minors act (UGMA)

FB - For benefit of

### SAFEKEEPING FEE CODE

DR - Drilling fees and unpaid rent

### APPENDIX D

### **COUNTY CODES**

| 01 | ALCONA         | 29 | GRATIOT    | 57 | MISSAUKEE    |
|----|----------------|----|------------|----|--------------|
| 02 | ALGER          | 30 | HILLSDALE  | 58 | MONROE       |
| 03 | ALLEGA         | 31 | HOUGHTON   | 59 | MONTCALM     |
| 04 | ALPENA         | 32 | HURON      | 60 | MONTMORENCY  |
| 05 | ANTRIM         | 33 | INGHAM     | 61 | MUSKEGON     |
| 06 | ARENAC         | 34 | IONIA      | 62 | NEWAYGO      |
| 07 | BARAGA         | 35 | IOSCO      | 63 | OAKLAND      |
| 08 | BARRY          | 36 | IRON       | 64 | OCEANA       |
| 09 | BAY            | 37 | ISABELLA   | 65 | OGEMAW       |
| 10 | BENZIE         | 38 | JACKSON    | 66 | ONTONAGON    |
| 11 | BERRIEN        | 39 | KALAMAZOO  | 67 | OSCEOLA      |
| 12 | BRANCH         | 40 | KALKASKA   | 68 | OSCODA       |
| 13 | CALHOUN        | 41 | KENT       | 69 | OTSEGO       |
| 14 | CASS           | 42 | KEWEENAW   | 70 | OTTAWA       |
| 15 | CHARLEVOIX     | 43 | LAKE       | 71 | PRESQUE ISLE |
| 16 | CHEBOYGAN      | 44 | LAPEER     | 72 | ROSCOMMON    |
| 17 | CHIPPEWA       | 45 | LEELANAU   | 73 | SAGINAW      |
| 18 | CLARE          | 46 | LENAWEE    | 74 | SAINT CLAIR  |
| 19 | CLINTON        | 47 | LIVINGSTON | 75 | SAINT JOSEPH |
| 20 | CRAWFORD       | 48 | LUCE       | 76 | SANILAC      |
| 21 | DELTA          | 49 | MACKINAC   | 77 | SCHOOLCRAFT  |
| 22 | DICKINSON      | 50 | MACOMB     | 78 | SHIAWASSEE   |
| 23 | EATON          | 51 | MANISTEE   | 79 | USCOLA       |
| 24 | EMMET          | 52 | MARQUETTE  | 80 | VAN BUREN    |
| 25 | GENESEE        | 53 | MASON      | 81 | WASHTENAW    |
| 26 | GLADWIN        | 54 | MECOSTA    | 82 | WAYNE        |
| 27 | GOGEBIC        | 55 | MENOMINEE  | 83 | WEXFORD      |
| 28 | GRAND TRAVERSE | 56 | MIDLAND    | 84 | OUT OF STATE |
|    |                |    |            |    |              |

### **BUSINESS TYPE CODES**

| 398 | GENERAL COMPANIES          | 794 | FAIRS                           |
|-----|----------------------------|-----|---------------------------------|
| 401 | RAILROADS                  | 806 | HOSPITALS AND NURSING HOMES     |
| 481 | TELEPHONE COMPANIES        | 821 | SCHOOLS                         |
| 491 | ELECTRIC COMPANIES         | 822 | STATE COLLEGES AND UNIVERSITIES |
| 492 | GAS COMPANIES              | 824 | COLLEGES (COMMUNITY)            |
| 602 | NATIONAL AND STATE BANKS   | 919 | FEDERAL GOVERNMENT              |
| 605 | SAFE DEPOSIT COMPANIES     | 929 | STATE GOVERNMENT                |
| 612 | SAVINGS AND LOAN COMPANIES | 939 | COUNTY GOVERNMENT (INCLUDING    |
| 613 | LAND BANKS                 |     | CIRCUIT COURTS)                 |
| 614 | CREDIT UNIONS              | 948 | VILLAGES AND CITIES             |
| 615 | SMALL LOAN COMPANIES       | 949 | CITY GOVERNMENT (INCLUDING      |
| 621 | STOCK BROKERS AND DEALERS  |     | DISTRICT COURTS)                |
| 639 | INSURANCE COMPANIES        | 959 | TOWNSHIP GOVERNMENT             |

### **APPENDIX E**

### **COUNTRY CODE TABLE**

|       | A FIGURE A MIGHT A MIG | G3.7.4 | CDELLI D.        | D   | D. TITOTI N            |
|-------|--|--------|------------------|-----|------------------------|
| AFG   | AFGHANISTAN  | GNA    | GRENADA          | PAK | PAKISTAN               |
| ALB   | ALBANIA  | GRC    | GREECE           | PAN | PANAMA                 |
| ALG   | ALGERIA  | GRE    | GREENLAND        | PAR | PARAGUAY               |
| AND   | ANDORRA  | GUA    | GUATEMALA        | PER | PERU                   |
| ANG   | ANGOLA   | GUI    | GUINEA           | PHI | PHILIPPINES            |
| ANT   | ANTIGUA & BARBUDA  | GUY    | GUYANA           | PNG | PAPUA NEW GUINEA       |
| ARG   | ARGENTINA  | HAL    | HAITI            | POL | POLAND                 |
| ARM   | ARMENIA  | HON    | HONDURAS         | POR | PORTUGAL               |
| AUS   | AUSTRALIA  | HUN    | HUNGARY          | QAT | QATAR                  |
| AUT   | AUSTRIA  | ICE    | ICELAND          | ROM | ROMANIA                |
|       |  |        |                  |     |                        |
| AZE   | AZERBAIJAN   | INA    | INDONESIA        | RUS | RUSSIA                 |
| BAH   | BAHAMAS  | IND    | INDIA            | RWA | RWANDA                 |
| BAN   | BANGLADESH   | IRA    | IRAN             | SAF | SOUTH AFRICA           |
| BAR   | BARBADOS   | IRE    | IRELAND          | SAU | SAUDI ARABIA           |
| BEL   | BELARUS  | IRQ    | IRAQ             | SEN | SENEGAL                |
| BEN   | BENIN  | ISR    | ISRAEL           | SEY | SEYCHELIES             |
| BHR   | BAHRAIN  | ITA    | ITALY            | SIN | SINGAPORE              |
| BHU   | BHUTAN   | IVC    | IVORY COST       | SKN | SAINT KITTS & NEVIS    |
| BLG   | BELGIUM  | JAM    | JAMICA           | SLE | SIERRA LEONE           |
| BLZ   | BELIZE   | JPN    | JAPAN            | SLO | SLOVAKIA               |
| BOL   | BOLIVIA  | JOR    | JORDAN           | SLU | SAINT LUCIA            |
| BOS   | BOSNIA & HERZEGOVINC   | KAZ    |                  | SMR |                        |
|       |  |        | KAZAKHSTAN       |     | SAN MARINO             |
| BOT   | BOTSWANA   | KEN    | KENYA            | SOL | SOLOMON ISLANDS        |
| BRA   | BRAZIL   | KIR    | KIRLBATI         | SOM | SOMALIA                |
| BRM   | BURMA  | KON    | NORTH KOREA      | SPA | SPAIN                  |
| BRN   | BURUNDI  | KOS    | SOUTH KOREA      | SRI | SRI LANKA              |
| BRU   | BRUNEI DARUSSALAM  | KUW    | KUWAIT           | STP | SAO TOME & PRINCIPE    |
| BUL   | BULGARIA   | KYR    | KYRGYZSTAN       | SUD | SUDAN                  |
| BUR   | BURKINA  | LAO    | LAOS             | SUR | SURINAME               |
| CAM   | CAMBODIA   | LAT    | LATVIA           | SVA | SLOVENIA               |
| CAN   | CANADA   | LEB    | LEBANON          | SVG | VINCENT & THE GRENA    |
| CAP   | CAPE VERDE   | LES    | LESOTHO          | SWA | SWAZILAND              |
| CAR   | CENTRAL AFRICA REP   | LIB    | LIBERIA          | SWE | SWEDEN                 |
| CAY   | CAYMAN ISLANDS   | LIE    |                  | SWI | SWITZERLAND            |
|       |  |        | LIECHTENSTEIN    |     |                        |
| CHA   | CHAD   | LIT    | LITHUANIA        | SYR | SYRIA                  |
| CNI   | CHILE  | LUX    | LUXEMBOURG       | TAI | TAIWAIN                |
| CMR   | CAMEROON   | LYA    | LIBYA            | TAJ | TAJIKISTAN             |
| CNA   | CHINA  | MAC    | MACEDONIA        | TAN | TANZANIA               |
| CNG   | CONGO (BRAZZAVILLE)  | MAD    | MADAGASCAR       | THA | THAILAND               |
| COL   | COLUMBIA   | MAL    | MALAWI           | TMN | TURKMENISTAN           |
| COM   | COMOROS  | MEX    | MEXICO           | TOG | TOGA                   |
| CRC   | COSTA RICA   | MGA    | MONGOLIA         | TON | TONGA                  |
| CRO   | CROATIA  | MIC    | MICRONESIA       | TRT | TRINDAD & TABAGO       |
| CUB   | CUBA   | MLD    | MALDIVES         | TUN | TUNISIA                |
| CYP   | CYPRUS   | MLI    | MALI             | TUR | TURKEY                 |
|       |  |        |                  |     | TUVALU                 |
| CZE   | CZECH REPUBLIC   | MLY    | MOLAYSIA         | TUV |                        |
| DEN   | DENMARK  | MOL    | MOLDOVA          | UAE | UNITED ARAB EMIRATES   |
| DJI   | DJIBOUTI   | MON    | MONACO           | UGA | UGANDA                 |
| DOM   | DOMINICA   | MOR    | MOROCCO          | UNK | N OF GREAT BRITIAN     |
| DRE   | DOMINICAN REPUBLIC   | MOT    | MONTSERRAT       | UKR | UKRAINE                |
| ECU   | ECUADOR  | MOZ    | MOZAMBIQUE       | URU | URUGUAY                |
| EGY   | EGYPT  | MRA    | MAURITANIA       | USA | UNITED STATES OF AMER. |
| ELS   | EL SALVADOR  | MRS    | MARSHALL ISLANDS | UZB | UZBEKISTAN             |
| EQG   | EQUATORIAL GUINEA  | MTA    | MALTA            | VAN | VANUATU                |
| ERI   | ERITREA  | MTU    | MAURITIUS        | VAT | VATICAN CITYHOLY SE    |
| EST   | ESTONIA  | MYA    | MYANMAR          | VEN | VENEZUELA              |
|       |  |        |                  |     |                        |
| ETH   | ETHIOPIA   | NAM    | NAMIBIA          | VIE | VIETNAM                |
| FIJ   | FIJI   | NAU    | NAURA            | WSM | WESTERN SAMOA          |
| FIN   | FINLAND  | NEP    | NEPAL            | YEM | YEMEN                  |
| FRA   | FRANCE   | NET    | NETHERLANDS      | YUG | YUGOSLAVIA             |
| GAB   | GABON  | NGA    | NIGERIA          | ZAI | ZAIRE                  |
| GAM   | GAMBIA   | NIC    | NICARAGUA        | ZAM | ZAMBIA                 |
| BGI   | GUINEA-BISSAU  | NIG    | NIGER            | ZIM | ZIMBABWE               |
| GEO   | GEORGIA  | NOR    | NORWAY           |     |                        |
| GER   | GERMANY  | NZD    | NEW ZEALAND      |     |                        |
| GHA   | GHANA  | OMN    | OMAN             |     |                        |
| 01111 | O1111111   | 011111 | O 111            |     |                        |

### **APPENDIX F**

### OWNER TITLE ABBREVIATION CODES

ACTNT - Accountant

AD - Administrator/Administratrix

AN - Airman

AB - Airman Basic

A1C - Airman First Class

ATTY - Attorney

CAPT - Captain

CPA - Certified Public Accountant

CHMN - Chairman

CEO - Chief Executive Officer

CMSGT - Chief Master Sergeant

CPO - Chief Petty Officer

CWO - Chief Warrant Officer

COL - Colonel

CDR - Commander

CSGM - Command Sergeant Major

COMM - Commissioner

CONT - Controller/Comptroller

CPL - Corporal

CCLK - County Clerk

CUST - Custodian

DECD - Deceased

DCLK - District Clerk

DR - Doctor

- DOCTO

ED - Editor

ENGR - Engineer

ENS - Ensign

EST - Estate

EXEC - Executor/Executrix

1LT - First Lieutenant

FAO - For the Account of

FBO - For the Benefit of

GEN - General

GOV - Governor

GDN - Guardian

HON - Honorable

INSP - Inspector

ITF - In Trust for

JDG - Judge

JP - Justice of Peace

JT - Joint Tenancy

LT - Lieutenant

LTC - Lieutenant Colonel

LCDR - Lieutenant Commander

MSGT - Master Sergeant

MAJ - Major

MGR - Manager

MNR - Minor

PTNR - Partner

PO - Petty Officer

PRES - President

PVT - Private

PFC - Private First Class

REP - Representative

REV - Reverend

SN - Seaman

2LT - Second Lieutenant

SEC - Secretary

SEN - Senator

SRA - Senior Airman

SGT - Sergeant

SFC - Sergeant First Class

SGM - Sergeant Major

SHER - Sheriff

SPEC - Specialist

SSGT - Staff Sergeant

TXCOL - Tax Collector/Assessor

TSGT - Tech Sergeant

TIC - Tenants in Common

TREAS - Treasurer

TR - Trust

TTEE - Trustee

UGMA - Uniform Gift to Minors Act

UMO - Under the Will of

DO NOT use these codes as owner type. Please refer to Appendix C.

### APPENDIX G

### **SUGGESTED ABBREVIATIONS**

| ADMIN | - ADMINISTRATION       | INS      | - INSURANCE                        |
|-------|------------------------|----------|------------------------------------|
| AMER  | - AMERICAN             | INTL     | - INTERNATIONAL                    |
| ASSOC | - ASSOCIATE            | INV      | - INVESTMENT                       |
| ASSOC | - ASSOCIATED           | LINS     | <ul> <li>LIFE INSURANCE</li> </ul> |
| ASSOC | - ASSOCIATES           | LTD      | - LIMITED                          |
| BUR   | - BUREAU               | MNG      | - MANAGING                         |
| CLK   | - CLERK                | MGMT     | - MANAGEMENT                       |
| CO    | - COMPANY              | MFG      | - MANUFACTURERS                    |
| COOP  | - COOPERATIVE          | MFG      | - MANUFACTURING                    |
| CORP  | - CORPORATION          | MKT      | - MARKET                           |
| CO    | - COUNTY               | MKT      | - MARKETING                        |
| CU    | - CREDIT UNION         | MECH     | - MECHANICAL                       |
| DISTR | - DISTRIBUTOR          | MED      | - MEDICAL                          |
| DIST  | - DISTRICT             | NATL     | - NATIONAL                         |
| E     | - EAST                 | N        | - NORTH                            |
| EMPL  | - EMPLOYEE             | NE       | - NORTHEAST                        |
| EST   | - ESTATE               | NW       | - NORTHWEST                        |
| EXPL  | - EXPLORATION          | OPER     | - OPERATING                        |
| FED   | - FEDERAL              | PTNRSHIP | - PARTNERSHIP                      |
| FCU   | - FEDERAL CREDIT UNION | S        | - SOUTH                            |
| GEN   | - GENERAL              | SE       | - SOUTHEAST                        |
| GOVT  | - GOVERNMENT           | SW       | - SOUTHWEST                        |
| GRP   | - GROUP                | STD      | - STANDARD                         |
| HOSP  | - HOSPITAL             | TR       | - TRUST                            |
| INC   | - INCORPORATED         | UTD      | - UNITED                           |
| INDEP | - INDEPENDENT          | UNIV     | - UNIVERSITY                       |
| INDL  | - INDUSTRIAL           | US       | - UNITED STATES                    |
| IND   | - INDUSTRY             | W        | - WEST                             |
| INST  | - INSTITUTION          | WSTN     | - WESTERN                          |
|       |                        |          |                                    |

### APPENDIX H

### STANDARDS FOR REPORTING UNCLAIMED PROPERTY

### **RULES OF ENTRY**

1. Never use punctuation in owner name fields (e.g., periods, commas, apostrophes, etc.).

2. Multiple owner names must be entered as separate owner records.

**Correct** Incorrect

Jones Bill & Mary
Jones Bill & Mary
Jones Bill and Mary
Jones Bill or Mary

3. Hyphens may not be used in owner name fields.

<u>Correct</u> <u>Incorrect</u>

Smith Jones Mary
Benton Brown Bill
Brown Bill Benton-

4. Owner name suffixes (i.e., Jr, Sr, III) must be entered after the name.

CorrectIncorrectSmith Bill JrSmith Jr Bill

5. Company names must be entered in the last name field. The word "and" must always be replaced with an amper sand (&). Ampersands may not be used in owner name fields for any other reason.

<u>Correct</u> <u>Incorrect</u> Jones & Jones Jones and Jones

6. Never abbreviate the first word of a company name. Always spell it out.

CorrectIncorrectAmerican Life InsAmer Life Ins

7. **Do not** use numeric in owner name fields.

CorrectIncorrectFirst State Bank1st State Bank

Exception: A number is part of a registered trademark (e.g., A1 Inc.).

8. Never begin an owner name with "the."

CorrectIncorrectBaby Store TheThe Baby Store

Bank of Rio Grande The The Bank of Rio Grande

9. Never use AKA, DBA, FKA, C/O, etc,. in owner name fields. Enter these abbreviations in the first address field.

**Correct** Incorrect

Smith Inc. c/o American Bank

c/o American Bank

GenCorp DBA Bargain Town

DBA Bargain Town

10. For trusts accounts or estates, list the person's name first.

**Correct** Incorrect

Smith Mary TR DTD 4/23/65 Trust of Mary Smith
Smith Mary Estate of Estate of Mary Smith

### SAMPLE DUE DILIGENCE FOR INACTIVE ACCOUNT

**HOLDER NAME & ADDRESS** 

CUSTOMER NAME
CUSTOMER ADDRESS
CUSTOMER CITY, STATE & ZIP

It is the policy of (HOLDER) to review and update our account records periodically. Our records of your savings/checking account number 123456 indicate no transactions as of (LASTACTIVITY DATE). Your account needs to be brought current. State law requires us to turn this account over to the state if the account is truly abandoned. To prevent us from turning your account over to the state's unclaimed property office, please check the appropriate box, sign in the space provided below, and return this to us as soon as possible.

| ( )   | ) The above address information is correct for the account and I am aware of the account.           |  |  |  |  |  |  |  |
|-------|---|--|--|--|--|--|--|--|
| ( )   | Please change the account holder(s) name(s) and/or address(es) to read as follows:                  |  |  |  |  |  |  |  |
|       |   |  |  |  |  |  |  |  |
| ( )   | I wish to close this account. Please send a check for the closeout amount to the following address: |  |  |  |  |  |  |  |
|       |   |  |  |  |  |  |  |  |
|       |   |  |  |  |  |  |  |  |
| Signa | nature Date   |  |  |  |  |  |  |  |
| Your  | r assistance is appreciated. Please contact our office if you have any questions.                   |  |  |  |  |  |  |  |
| Since | perely,   |  |  |  |  |  |  |  |
|       |   |  |  |  |  |  |  |  |
| Vour  | r Bank Officer  |  |  |  |  |  |  |  |

### SAMPLE DUE DILIGENCE FOR OUTSTANDING CHECK

| To:  | Date:                          |  |  |
|--|--------------------------------|--|--|
|  |                                |  |  |
| Re: Disposition of Outsta  | nding Check                    |  |  |
| Our records indicate that  | the following check issue      | ed to you is still outstanding:          |  |
| Check#   | <b>Date Issued</b>             | <b>Amount Issued</b>                     |  |
| Please indicate the disposition                                      | of the check on the bottom of  | this form and return it to us withindays |  |
| Disposition of Check   |                                |  |  |
| I cashed the above check   | . Provide date cashed, if know | vn://                                    |  |
| I am holding the above cl  |                                | :  |  |
| I received the above chec I did not receive the abov Other, explain: |                                | royed. Please issue a replacement check. |  |
|  |                                |  |  |
| Address (if other than above):                                       |                                |  |  |

### **F**ORMS

Michigan Department of Treasury 2011 (Rev. 9-08)

### Michigan Holder Transmittal for Annual Report of Unclaimed Property

Issued under the authority of P.A. 29 of 1995. Filing is mandatory. Failure to file is punishable by fine.

Mail to: **Unclaimed Property Division Michigan Department of Treasury** P.O. Box 30756 Lansing, MI 48909

This transmittal must accompany your annual report whether you are filing on paper, diskette or CD Rom. If your report does not meet Treasury specifications it will be returned to you. Holders filing from multiple Report Year branches under one federal employer number must coordinate a branch identification number with the UPD. **General Information** Holder's Name UPD Branch ID No. Federal Employer ID Number Address State of Incorporation Date of Incorporation City, State, ZIP Code County Report Number Did you exercise due diligence this report year? Did you file a Report of Unclaimed Property last year? \_\_ No No, explain: Yes Primary business activity Report Type What media type are you filing? CD Rom disk paper (Form 1223) Annual Annual Sales/Premiums Do not mix media types for the same report. Compliance Is the company: No First Yes Total Assets a wholly-owned subsidiary? ..... Audit a division? ..... No. of Employees Other publicly traded? private?..... Reporting Requirements You must report and submit all property (defined in General Instructions) in your custody that belongs to someone else and has gone unclaimed. Total number of safety deposit boxes reported Total number of shares of stock/mutual funds ..... \$ Enter the total amount paid with this transmittal Make checks payable to "State of Michigan". Certification I declare under penalties imposed by P.A. 29 of 1995, as amended, that I have examined this report and to the best of my knowledge it is true and complete. Print Contact Name Telephone Number E-mail Address Fax Number Authorizing Signature Title Date

If you are a successor, attach a separate sheet listing the names and last known addresses of all previous holders of the property being reported. If you have changed your name during the reporting period, attach a separate sheet listing all prior names.

| Treasury Use Only |        |          |              |  |
|-------------------|--------|----------|--------------|--|
| Holder ID         | Report | Stock ID | Import Batch |  |

Michigan Department of Treasury 1223 (Rev. 9-06)

# Michigan Annual Report of Unclaimed Cash and/or Safe Deposit Boxes Issued under Public Act 29 of 1995. Filling is mandatory.

| Attach this form to the <i>Michigan Holder Transmittal</i> (Form 2011). Complete this report  | this report  | Holder Name |
|---|--------------|-------------|
| for cash items and for safety deposit box contents only. All items less than \$50 may be      | \$50 may be  |             |
| reported in aggregate (see aggregate filing instructions). If you are reporting more than ten | ore than ten | Federal Emp |
| properties, you must submit your report on diskette/CD Rom. See instructions for              | ructions for |             |
| magnetic filing. Report securities separately (Form 3164).                                    |              |             |

|                           |                            | Page of           |  |
|---------------------------|----------------------------|-------------------|--|
|                           | Holder Name                | UPD Branch ID No. |  |
| e than ten<br>ictions for | Federal Employer ID Number | Report Year       |  |
| di<br>di                  |                            | Report Number     |  |

Properties. Complete all items for each property. You must report all available owner information.

|   | k. Amount Remitted                           |   | k. Amount Remitted              |
|---|---------------------------------|---|---------------------------------|---|---------------------------------|---|--|---|---------------------------------|
| g. Date of Last<br>Activity<br>(YYYYMMDD)             | <u>⊼</u> ↔                      | g. Date of Last<br>Activity<br>(YYYYMMDD)             | <del>⊼</del> &                  | g. Date of Last<br>Activity<br>(YYYYMMDD)             | <del>⊼. &amp;</del>             | g. Date of Last<br>Activity<br>(YYYYMMDD)             | ⊼. <del>&amp;</del>                          | g. Date of Last<br>Activity<br>(YYYYMMDD)             | ⊼. <del>&amp;</del>             |
| f. Safekeeping Fees<br>(Enter Below)                  | Amount Deducted                              | f. Safekeeping Fees<br>(Enter Below)                  | Amount Deducted                 |
| f. Sa<br>()   | Type<br>DR                      | f. Sa<br>()   | Type<br>DR                      | f. Sa<br>()   | Type<br>DR                      | f. Sa<br>(  | Type<br>DR                                   | f. Sa<br>()   | Type<br>DR                      |
| d. Rel. Code e. Social Security No. or FEIN           | . If interest bearing, enter %. | e. Social Security No. or FEIN                        | . If interest bearing, enter %. | e. Social Security No. or FEIN                        | . If interest bearing, enter %. | d. Rel. Code e. Social Security No. or FEIN           | . If interest bearing, enter %.              | e. Social Security No. or FEIN                        | . If interest bearing, enter %. |
| d. Rel. Code  | <u> </u>                        | d. Rel. Code  | <u>i.</u>                       | d. Rel. Code  | <u> </u>                        | d. Rel. Code  | <u>                                     </u> | d. Rel. Code  | <u> </u>                        |
| c. Owner's Name (Last, First, MI), Last Known Address |                                 | c. Owner's Name (Last, First, MI), Last Known Address |                                 | c. Owner's Name (Last, First, MI), Last Known Address |                                 | c. Owner's Name (Last, First, MI), Last Known Address |  | c. Owner's Name (Last, First, MI), Last Known Address |                                 |
| b. P. Type  | i. Quantity                                  | b. P. Type  | i. Quantity                     |
| a. Property Description                               | h. Identifying Number                        | a. Property Description                               | h. Identifying Number           |

Complete this item only on the *last page* of the report. Enter the total dollars you are submitting with this report.

Total: This page only

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### Michigan Annual Report of Unclaimed Shares of Stock/Mutual Funds

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|----------------------------|---------------|
| Holder Name                | UPD Branch ID |
| Federal Employer ID Number | Report Year   |
|                            | Report Number |

Properties. Complete all items for each property. You must report all available owner information.

| No. of Shares  |
|--|
| C. Owner's Name (Last, First, MI), Last Known Address d. Rei. Code e. Social Security No. or FEIN f. CUSIP Number Activity (YYYYMMDD)  1. If interest bearing, enter %. Periodic Payments (from/lo) (YYYYMMDD)  2. Owner's Name (Last, First, MI), Last Known Address d. Rei. Code e. Social Security No. or FEIN f. CUSIP Number (Activity CANYMMDD)  3. If interest bearing, enter %. Periodic Payments (from/lo) (YYYYMMDD)  3. If interest bearing, enter %. Periodic Payments (from/lo) (YYYYMMDD)  3. If interest bearing, enter %. Periodic Payments (from/lo) (YYYYMMDD)  3. If interest bearing, enter %. Periodic Payments (from/lo) (YYYYMMDD)  3. If interest bearing, enter %. Periodic Payments (from/lo) (YYYYMMDD)  3. If interest bearing, enter %. Periodic Payments (from/lo) (YYYYMMDD)  |
| c. Owner's Name (Last, First, MI), Last Known Address d. Rel. Code e. Social Security No. or FEIN f. CUSIP Number Activity (TYYYMMDD)  1. If interest bearing, enter %. Periodic Payments (from/to)  2. Owner's Name (Last, First, MI), Last Known Address d. Rel. Code e. Social Security No. or FEIN f. CUSIP Number g. Date of Last Activity (TYYYMMDD)  3. If interest bearing, enter %. Periodic Payments (from/to)  4. If interest bearing, enter %. Periodic Payments (from/to)  5. If interest bearing, enter %. Periodic Payments (from/to)  6. Date of Last Activity (TYYYMMDD)  7. If interest bearing, enter %. Periodic Payments (from/to)  8. Date of Last Activity (TYYYMMDD)  9. If interest bearing, enter %. Periodic Payments (from/to)  1. If interest bearing, enter %. Periodic Payments (from/to)  1. If interest bearing, enter %. Periodic Payments (from/to)  1. If interest bearing, enter %. Periodic Payments (from/to)  1. If interest bearing, enter %. Periodic Payments (from/to)  1. If interest bearing, enter %. Periodic Payments (from/to)  1. If interest bearing, enter %. Periodic Payments (from/to)  1. If interest bearing, enter %. Periodic Payments (from/to)  1. If interest bearing, enter %. Periodic Payments (from/to)  1. If interest bearing, enter %. Periodic Payments (from/to) |
| c. Owner's Name (Last, First, MI), Last Known Address  |
| c. Owner's Name (Last, First, MI), Last Known Address d. Rei. Code e. Social Security No. or FEIN f. CUSIP Number Activity (YYYYMMDD)  j. If interest bearing, enter %. Periodic Payments (from/to) Activity (YYYYMMDD)  c. Owner's Name (Last, First, MI), Last Known Address d. Rei. Code e. Social Security No. or FEIN f. CUSIP Number Activity (YYYYMMDD)  j. If interest bearing, enter %. Periodic Payments (from/to) (YYYYMMDD)  |
| c. Owner's Name (Last, First, MI), Last Known Address d. Rel. Code e. Social Security No. or FEIN f. CUSIP Number Activity (YYYYMMDD)  j. If interest bearing, enter %. Periodic Payments (from/to) Activity (YYYYMMDD)  c. Owner's Name (Last, First, MI), Last Known Address d. Rel. Code e. Social Security No. or FEIN f. CUSIP Number Activity (YYYYMMDD)  j. If interest bearing, enter %. Periodic Payments (from/to)   |
| c. Owner's Name (Last, First, MI), Last Known Address d. Rel. Code e. Social Security No. or FEIN f. CUSIP Number Activity (YYYYMMDD) j. If interest bearing, enter %. Periodic Payments (from/to)   |
| c. Owner's Name (Last, First, MI), Last Known Address d. Rel. Code e. Social Security No. or FEIN f. CUSIP Number Activity (YYYYMMIDD) (YYYYMMIDD) j. If interest bearing, enter %. Periodic Payments (from/to) I.   |
| j. If interest bearing, enter %. Periodic Payments (from/to)   |
|  |

s Complete this item only on the *last page* of the report. Enter the total dollars you are submitting with this report.

Michigan Department of Treasury 3167 (Rev. 9-08)

## Michigan Inventory Report of Unclaimed Property Safe Deposit Box Contents Issued under Public Act 29 of 1995. Filing is mandatory.

| ( N 2 0 10 10 10 10 10 10 10 10 10 10 10 10 1   | Holder Name  |  | Federal Employer  |
|---|--|--|---|
| Attach one copy of this list of contents to your the Michigan Holder Transmittal (Form 2011) along with | Michigan Annual Report of Unclaimed Cash and Safe Deposit Boxes (Form 1223) or a diskette when it is | reported to the State of Michigan. Report only one safe deposit box per page (a copy of the inventory should | be included in each box). Keep one copy for your records. See instructions for reporting specific property. |

| Attach one copy of this list of contents to vour the Michigan Holder Transmittal (Form 2011) along with   | gan Holder Transmittal (Form 2011) along with   |                              | Page of  |
|---|---|------------------------------|--|
| Michigan Annual Report of Unclaimed Cash and Safe Deposit Boxes (Form 1223) or a diskette when it is reported to the State of Michigan. Report only one safe deposit box per page (a copy of the inventory should | sit Boxes (Form 1223) or a diskette when it is sit box per page (a copy of the inventory should | Holder Name                  | UPD Branch ID  |
| be included in each box). Keep one copy for your records. See instructions for reporting specific property.   | structions for reporting specific property.   | Federal Employer ID Number   | Report Year  |
| Owner Identification and Costs  |   |                              |  |
| Owner's Name (if more than one, list all)   | Social Security No. or FEIN   | Enter the type and amount of | Enter the type and amount of fees for this deposit box only. |
|   |   | Туре                         | Amount   |
| Owner's Address   | Safe Deposit Box No.  |                              |  |
|   | Branch Where Property Was Held  |                              |  |
|   | Date of Abandonment   |                              |  |
|   |   |                              |  |

|  |  |  |  |  |  |   |                                     | Inventoried By ADPD Approval |                  |
|--|--|--|--|--|--|---|-------------------------------------|------------------------------|------------------|
| egory  |  |  |  |  |  | - | Authorized Bank Officials Signature |                              | Date Inventoried |
| Itemized Description of Contents by Category |  |  |  |  |  |   | Authorized Bank Officials Signature |                              | Date Box Opened  |

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### Michigan Holder Request for Refund

Issued under Public Act 29 of 1995. Filing is voluntary.

Use this form to request a refund of unclaimed property that was reported to the State of Michigan in error. Also use this form for items that you reimbursed to the rightful owner or for which you reestablished an account. Submit a separate request for each report year.

3 Denied

Treasury Use Only

Claim Number Prepared by:

| Holder Information    | rmation   |   |                            |  |   |   |   |  |
|-----------------------|---|---|----------------------------|--|---|---|---|--|
| Holder's Name         |   |   | Federal Employer ID Number |  | Telephone Number R  | Report Year                             | UPD Branch  | UPD Branch ID Number   |
| Street Address        |   |   | City, State and Zip Code   |  |   |   | Total Amount of Report  | t of Report  |
|                       |   |   |                            |  |   |   |   |  |
| Claim Information     | mation  |   |                            |  |   |   |   |  |
| Property Code         | Account/Reference No.<br>(If in aggregate, specify)       | Owner's Name<br>(Exactly as indicated on report.) | Owner's Address            | Claimant's Name<br>(If different from owner.)  | Claimant's Address<br>(If different from owner.)                          |   | Date paid to claimant or acct. reactivated. (include proof)                               | Amount Paid  |
| a.                    |   |   |                            |  |   |   |   |  |
| b.                    |   |   |                            |  |   |   |   |  |
| °C.                   |   |   |                            |  |   |   |   |  |
| ď.                    |   |   |                            |  |   |   |   |  |
| If your refund iध     | If your refund is due to a reporting error, explain here. | plain here.                                       |                            |  |   | · Œ                                     | TOTAL<br>REFUND   |  |
|                       |   |   |                            |  |   |   | ı   |  |
| Holder Certification  | tification  |   |                            |  |   |   |   |  |
| Subscribed a          | Subscribed and sworn to before me the                     | ıe day of   | , 20 Secur<br>paym         | I certify that the properties listed above which were included in the Report of Unclaimed Property or Securities filed for the report year in item 1d have been paid to the rightful owner or claimant. Upon payment of this request, I agree to hold the state harmless from all claims and loss, demands, costs and other expenses which the state may sustain by reason of turning over the property to the holder and by its | above which were incli<br>in item 1d have been<br>hold the state harmless | uded in the paid to the strom all claim | Report of Unclinghtful owner of the sand loss, define the property to the property to the | aimed Property or or claimant. Upon emands, costs and be holder and by its |
| 1                     |   | (Notary Signature)                                |                            | further refusal to pay the property to any other person.   | to any other person.  |   |   |  |
| Notary Public         | Notary Public III and for the county of _                 |   | _ Michigan. Signatu        | Signature of Holder Representative   |   |   | Date  |  |
| My commission expires | ion expires   |   | Print o                    | Print or Type Representative's Name  |   |   | Date  |  |

Michigan Department of Treasury 3277 (Rev. 9-02)

### Michigan Claim for Refund of Unclaimed Property

Issued under Public Act 29 of 1995. Filing is required to obtain a refund.

| Treasury Use Only |
|-------------------|
| Claim ID          |
| Date              |
| User ID           |

To request your refund, complete the claimant information below, verify the owner information and attach the required documentation. Sign this claim in the presence of a notary public. There is no charge for this service.

| A. Claimant Information   |                      |                                       |                                 |  |
|---|----------------------|---------------------------------------|---------------------------------|--|
|   |                      | Claimant's Social Se                  | curity No. or FEIN              |  |
|   |                      | Daytime Phone No.                     |                                 |  |
|   |                      | Daytime Fhore No.                     |                                 |  |
| What is your relationship to the property owner?  |                      |                                       |                                 |  |
| Self Parent Guardian  |                      |                                       |                                 |  |
| ☐ Trustee ☐ Heir ☐ Executor/Administrator   | Othe                 | r, specify                            |                                 |  |
|   |                      |                                       |                                 |  |
|   |                      |                                       |                                 |  |
| B. Owner Information  |                      |                                       |                                 |  |
| Owner's Name  |                      | Owner's Social Secu                   | urity No. or FEIN               |  |
|   |                      |                                       |                                 |  |
| Co-Owner's Name   |                      | Co-Owner's Social S                   | ecurity No or FEIN              |  |
|   |                      |                                       |                                 |  |
|   |                      |                                       |                                 |  |
| C. Holder Information   |                      |                                       |                                 |  |
| Name of Financial Institution   |                      | Holder's FEIN                         |                                 |  |
|   |                      |                                       |                                 |  |
| Location (City, State, ZIP Code)  |                      | Date Property Was Originally Reported |                                 |  |
|   |                      |                                       |                                 |  |
| If the property was reported before 1988, include the   |                      |                                       |                                 |  |
| Escheat file number and the page the item was listed on.  |                      |                                       |                                 |  |
|   |                      |                                       |                                 |  |
|   |                      |                                       |                                 |  |
| D. Property Being Refunded Property Description (general)   | Account Number (if a | applicable)                           | Amount                          |  |
| Property Description (general)  | Account Number (ii a | ррпсавіе)                             | Amount                          |  |
| Property Description (general)  | Account Number (if a | pplicable)                            | Amount                          |  |
|   |                      |                                       |                                 |  |
|   | 1                    |                                       |                                 |  |
|   |                      |                                       |                                 |  |
| E. Documentation Required   |                      |                                       |                                 |  |
| The Michigan Department of Treasury, Unclaimed Property Divis   |                      |                                       |                                 |  |
| property turned over to the state when the holder was unable t  |                      |                                       |                                 |  |
| furnishing copies of your driver license (or other government pictuprovide additional documentation to prove ownership. | ire identification)  | and your Social                       | Security card. You may need to  |  |
| provide additional documentation to prove ownership.  |                      |                                       |                                 |  |
|   |                      |                                       |                                 |  |
| F. Affidavit  |                      |                                       |                                 |  |
| Under penalty of perjury, I certify that the information provided   | on this claim is     | true and all sup                      | porting documentation is either |  |
| original or unaltered copies of the original documents. Upon paym   | ent of this claim,   | I indemnify the S                     |                                 |  |
| and employees from any damages, claims or losses resulting from   |                      | operty.                               |                                 |  |
| Claimant's Signature  | Notarization         |                                       |                                 |  |
|   |                      |                                       |                                 |  |
| Co-Claimant Signature   |                      |                                       |                                 |  |