

Unclaimed Property Claim Form



Please fill out the form in its entirety.

Date: _____ Company Name: _____

First Name: _____ Last Name: _____

Check Number: _____ Check Date: _____ Amount: _____

Current Address: _____

Email Address: _____ Phone Number: _____

Address at date of original check issue if different than current address:

In addition to the claim form:

Individuals must provide a copy of their current driver's license or other government issued photo ID. Business claimants must provide a business card in addition to a current driver's license or ID.

Mail completed form to:

CEDAR HILL INDEPENDENT SCHOOL DISTRICT
Attention: Accounting Manager
285 Uptown Blvd, Bldg 300, Cedar Hill, TX 75104

Or email to AccountsPayable@chisd.net

I hereby wish to claim my rightful ownership of these funds as noted above and affirm that the above mentioned check was never cashed and will not be cashed if found at a later date.

Signature

Name Printed

Date Signed

Checks will be issued within approximately 2-3 weeks of the receipt of request.