# City of Northampton, Massachusetts
# Office of the Treasurer

**210 Main Street, Room 3**
**Northampton, MA 01060-3110**
**Telephone: (413) 587-1296**
**Fax: (413) 587-1185**

**Kristine A Bissell**
**Treasurer**

**Kristen Parmenter**
**Assistant Treasurer**

## ABANDONED and UNCLAIMED CHECK FORM

| **FIRST & LAST NAME:** *Please Print* | **ADDRESSS (Correction if different**): *Please Print* |
|---|---|
| | |

Claimant must sign below (if more than one person is entitled to the property both must sign). Under penalties of perjury, I declare that my claim of ownership to this property is true, absolute and complete.

I (we) have not sold, assigned, transferred, pledged this property, nor given it away nor empowered any person or persons, corporation or association to draw any amount on same.

_____

Signature of Claimant  Date  Tax Id or Social Security Number

_____

Signature of Co-Owner  Date  Tax Id or Social Security Number

(_____)_____
Telephone Number

**We need the following to process your claim**
Name, Address, SS# or Tax ID#, Telephone #, and Signature(s)
**If all information is not completed, the claim will not be processed.**

**NOTE:** Please be sure to make a copy of the claim form for your records and return the original completed form, along with any necessary documentation to the address shown above. An original signature is required. Electronic copies, photocopies and faxes will not be accepted.

**FOR OFFICE USE ONLY – PLEASE DO NOT WRITE BELOW THIS LINE**

CHECK NUMBER  DATE  AMOUNT  DESCRIPTION