

Desk Review of Unclaimed Property (2006)

Initials:

Holder Name:

Number:

| <u>AP1 – FRONT:</u> | YES | NO | N/A |
|------------------------------------|------------|-----------|------------|
| 1st Time Filer: yes, required* | | | |
| Check \$ match AP1 form? | | | |
| Check \$ match AP2 form? | | | |
| Messy, hard to read? | | | |
| Address block complete | | | |
| Contact: name/number | | | |
| Federal ID number | | | |
| State & year of Inc / * | | | |
| Co. Data: Sales \$ * | | | |
| Employees # * | | | |
| Due diligence performed: | | | |
| Signature Block Completed | | | |
| Signed? | | | |
| | | | |
| <u>AP1 – BACK:</u> | | | |
| Summary blocks completed? | | | |
| | | | |
| <u>AP2 – FRONT ONLY:</u> | | | |
| Was AP2 form used? | | | |
| Owner information: | | | |
| Prop code/Identifying number | | | |
| Complete name/address > \$100 | | | |
| SSN | | | |
| Date of last transaction | | | |
| Deduction/withholding | | | |
| Small balance/aggregate | | | |
| Balances < \$20 | | | |
| Interest rate | | | |
| Property Types: | | | |
| PR/wages (6/30/05 & prior) | | | |
| Accounts Payable(6/30/01 & prior) | | | |
| Cr Bal/Refunds (6/30/01 & prior) | | | |
| Vendor-to-vendor (6/30/01 & prior) | | | |
| Health Benefits (6/30/01 & prior) | | | |
| Stock/Equity (6/30/01 & prior) | | | |
| | | | |
| Report history attached ** | | | |
| If letter sent, copy & attach AP1 | | | |

** If not first time filer

Audit/revisedchecklist