



# Department of the Treasury

COMMONWEALTH OF VIRGINIA

Division of Unclaimed Property  
P O Box 2478, Richmond, VA 23218-2478

# AP-1

PHONE (804) 225-2393 FAX (804) 786-4653 TOLL FREE 1-800-468-1088

Holder Number \_\_\_\_\_  
 Holder Name \_\_\_\_\_  
 Address \_\_\_\_\_  
 City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_  
 Federal Tax ID \_\_\_\_\_  
 Contact Name \_\_\_\_\_  
 Telephone Number \_\_\_\_\_  
 Fax Number \_\_\_\_\_  
 E-Mail address \_\_\_\_\_  
 State of Incorporation \_\_\_\_\_  
 Date of Incorporation \_\_\_\_\_  
 SIC/NAICS code \_\_\_\_\_  
 Number of Employees \_\_\_\_\_  
 Total Assets \_\_\_\_\_  
 Report Year \_\_\_\_\_

**Type of Report: (check one)**

- Regular (Annual)
- Audit
- Negative
- Special

**Report Media: (check one)**

- paper/hardcopy
- CD
- Uploaded file to website

**Reported Total Amounts:**

( \_\_\_\_\_ cash)  
 ( \_\_\_\_\_ security shares)  
 ( \_\_\_\_\_ #of tangible accounts)

**Total shares remitted:**

\_\_\_\_\_ via DTC;  
 \_\_\_\_\_ via DRP statement;  
 \_\_\_\_\_ via inhouse statement

**Cash Remitted by:**

<input type="checkbox"/> check	_____ check #;	_____ Amount
<input type="checkbox"/> check	_____ check #;	_____ Amount
<input type="checkbox"/> check	_____ check #;	_____ Amount
<input type="checkbox"/> wire	_____ wire ID #;	_____ Amount
<input type="checkbox"/> ACH	_____ ACH #;	_____ Amount
<input type="checkbox"/> IAT	_____ IAT #;	_____ Amount

I,

\_\_\_\_\_,  
 CERTIFY THAT I HAVE CAUSED TO BE PREPARED AND HAVE EXAMINED THIS REPORT AS TO PROPERTY PRESUMED ABANDONED UNDER THE VIRGINIA UNCLAIMED PROPERTY LAW FOR THE YEAR ENDING AS STATED, THAT I AM DULY AUTHORIZED TO EXECUTE THIS VERIFICATION BY THE HOLDER AND BY LAW AND THAT I BELIEVE THAT SAID REPORT IS TRUE, CORRECT, AND COMPLETE AS OF SAID DATE, EXCEPTING FOR SUCH PROPERTY AS HAS SINCE CEASED TO BE ABANDONED. I CERTIFY THAT DUE DILIGENCE WAS PERFORMED ON THE FOLLOWING DATES

\_\_\_\_\_ TO \_\_\_\_\_

SIGNATURE

\_\_\_\_\_

TITLE

\_\_\_\_\_

DATE \_\_\_\_\_