GENERAL CLAIM REQUEST FORM

Please sign and mail form to:

Signature

HUNT COUNTY AUDITOR'S OFFICE ATTN: UNCLAIMED PROPERTY

P.O. BOX 1097

GREENVILLE, TX 75403

	IER INFORMATION	
IOLDER NAME	TAX ID	NUMBER
AAILING ADDRESS		
CITY	STATE	ZIP CODE
E-MAIL ADDRESS	PHONE NUMBER	
	DESCRIPTION	
CLAIM AMOUNT	DESCRIPTION	
ORIGINAL CHECK(S)) IS:	
LOST/DESTROYE	D	
NEVER RECEIVED		
INVALID DUE TO	DATE BEING PAST 180 DAYS	
(IF CHEC	KED PLEASE SEND ORIGINAL CHECK	WITH FORM)
IF YOU HAVE ANY QUES	TIONS REGUARDING UNCLAIMED PR	OPERTY, YOU MAY CALL 903-408-4121
	(903-408-4280 - EMAIL:kcrowthe	
certify that the above is	s true and that I am the original o	wner of the unclaimed property.
berting that the above is	o true and that rain the original o	where or the undumed property.

Date