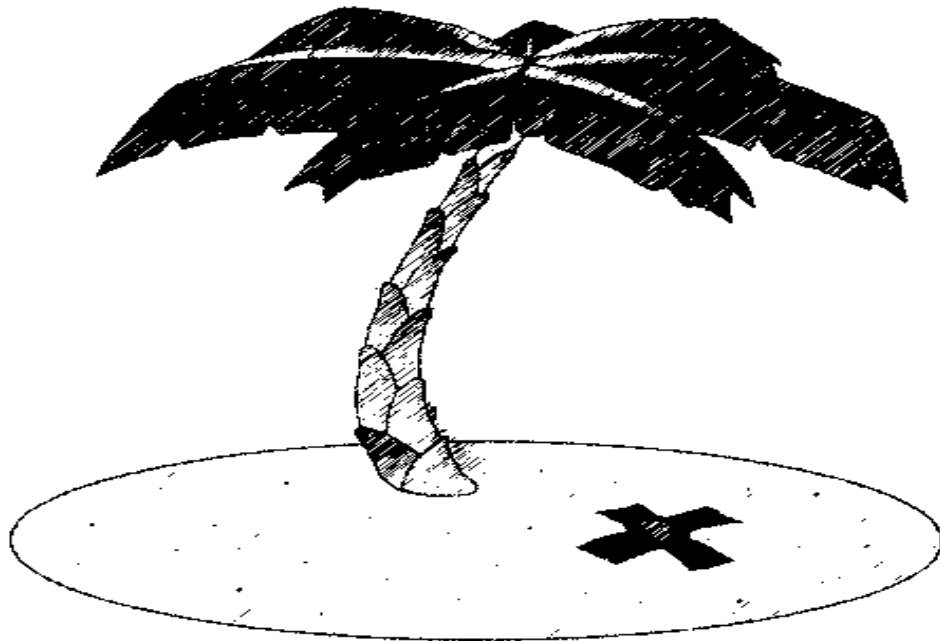




**ALEX SINK  
CHIEF FINANCIAL OFFICER  
STATE OF FLORIDA**

Florida Department of Financial Services

# **2008 Report Year Unclaimed Property Reporting Instructions for the Year Ending 12/31/2008**



**Bureau of Unclaimed Property**

**850-413-5522**

**[www.fltreasurehunt.org](http://www.fltreasurehunt.org)**

Revised 12/09/2008

This Reporting Instructions Manual is designed to contain all the information, forms, etc. an entity will need to report unclaimed property to the Florida Department of Financial Services (Department). Holders of unclaimed property play an important role in reuniting property with its owners. This manual is designed to help holders of unclaimed property (i.e. corporations, retailers, public entities, etc.) report unclaimed property and provide updated instructions for those who have previously reported. **Section 1 of this manual contains important general information relating to the reporting of unclaimed property.** Section 2 of the manual contains the reporting requirements, forms etc. that are to be used in reporting unclaimed property to the Department.

We would like to highlight a few requirements that are detailed in this manual that a holder should remember when preparing and submitting the unclaimed property report:

- The statutory authority for unclaimed property is Chapter 717, Florida Statutes, The Florida Disposition of Unclaimed Property Act.
- The report must be filed before May 1 of each year. The report shall apply to the preceding calendar year.
- A report identifying 25 or more properties **must be** submitted by an electronic medium (diskette or CD-ROM). A report identifying less than 25 accounts may be submitted either by an electronic medium (diskette or CD-ROM) or manually using the Department's reporting forms. Owner names should not contain punctuation or numerical values unless the owner is a business whose name contains a numerical value (i.e. 84 Lumber). Non-compliance with this requirement could lead to a report being returned for correction.
- Free software for electronic reporting can be downloaded from our web page at [www.fltreasurehunt.org](http://www.fltreasurehunt.org) under the Reporting Unclaimed Property link.
- To increase the chances of returning property to the rightful owners, all relevant owner information should be included on the report (name, address, ssn, date of birth, etc.).
- For unclaimed property items with a value of \$50 or more, a written notice (due diligence) must be sent by the holder to the apparent owner not more than 120 days and not less than 60 days prior to filing the report (See Section 1.3.3 on page 6).
- All business entities **subject** to Chapter 717 are required to file an annual unclaimed property report.
- Full Remittance (cash and securities) must be enclosed with report. Please make your check payable to "Florida Department of Financial Services" and all securities certificates should be registered to the "Florida Department of Financial Services" (Securities transfer instructions can be found in Section 2.2.2. on page 16 and in Section 2.3.2 on page 37).

If you have any questions about the reporting of unclaimed property, the Reporting Section telephone number is (850) 413-5522 and the fax number is (850) 413-3018. The e-mail address is [EReporting@MyFloridaCFO.com](mailto:EReporting@MyFloridaCFO.com).

The Compliance Section periodically conducts Unclaimed Property workshops to help educate the holder community in reporting unclaimed property. Please visit our web page at [www.fltreasurehunt.org](http://www.fltreasurehunt.org) and click on the Events link to see scheduled workshops or contact the Compliance Section at (850) 413-5522 for more information.

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## 1. GENERAL INFORMATION

This section is intended to educate concerning unclaimed property reporting obligation as required under Chapter 717, Florida Statutes, The Florida Disposition of Unclaimed Property Act and Regulations.

### 1.1 THE FLORIDA DISPOSITION OF UNCLAIMED PROPERTY ACT AND REGULATIONS

Chapter 717, Florida Statutes, is The Florida Disposition of Unclaimed Property Act and Regulations. Chapter 717, Florida Statutes, defines unclaimed property and the entities subject to this law, how long an entity must maintain the property, what to do with the property once it is determined to be unclaimed and what happens if the property is not reported and remitted by the entity in a timely manner. Virtually every business organization from non-profits to Fortune 500 corporations to governmental agencies has some form of unclaimed property in their possession and is considered a “Holder” of unclaimed property.

The Florida Department of Financial Services is the designated state agency which administers Chapter 717, Florida Statutes.

### 1.2 WHAT IS UNCLAIMED PROPERTY?

Unclaimed property is a personal **intangible** property liability that has been inactive on the books of an entity for a period of time (dormancy period), and for which there has been no owner generated activity. **The intangible property liability does not become unclaimed property until it reaches the required dormancy period as provided by law.** The only **tangible** personal property addressed by the Unclaimed Property Law are items from safe deposit boxes in financial institutions as provided in Section 717.116, Florida Statutes. Chapter 717, Florida Statutes, provides the dormancy period for various intangible properties and the safe deposit box property. Examples of potential unclaimed property and the designated dormancy period are in the Florida Property Code and Dormancy Table found in Appendix D on pages 49-51.

**The entity in possession of a property belonging to another or indebted to another on an obligation is considered a “Holder” and will be referred as “Holder” throughout the remainder of this manual.**

### 1.3 HOW TO REPORT UNCLAIMED PROPERTY?

#### 1.3.1 Determine Liability

Determine your liability by identifying the properties that meet the definition of unclaimed property (See section 1.2 of this manual).

#### 1.3.2 Determine Where to Report

The U.S. Supreme Court, in its 1965 *Texas v. New Jersey* decision, established the rules of jurisdiction as to where a holder should report **intangible** unclaimed property. In accordance with that decision, the **primary rule** in determining where to report **intangible** unclaimed property dictates that **intangible** unclaimed property should be reported to the state of the owner's last known address. The **secondary rule** in determining where to report **intangible** unclaimed property dictates that when there is either an unknown owner, no last known address or the owner's address was located in a state or country without an applicable unclaimed property law, the **intangible** property is be reported to the holder's state of domicile.

Domicile means the state of incorporation, in the case of a corporation incorporated under the laws of a state, and the state of the principal place of business, in the case of a person not incorporated under the laws of a state.

**Per Section 717.116, Florida Statutes, all tangible and intangible property held by a banking or financial organization in a safe-deposit box or any other safekeeping repository in Florida that has not been claimed by the owner for more than 3 years after the lease or rental period on the box or other repository has expired is presumed unclaimed and should be reported to Florida.**

**IMPORTANT** – Once you determine where you are required to report the property you must comply with the unclaimed property laws for that state. Requirements of the unclaimed property law vary among states, specifically for the property dormancy period, due diligence requirements, and when and how to report.

### **1.3.3 Perform Due Diligence**

Section 717.117(4), Florida Statutes, requires that for all the unclaimed property accounts valued at \$50 or greater, the holder must conduct a search for the apparent owner using due diligence. Due diligence is the use of reasonable and prudent methods to locate the apparent owners of unclaimed property accounts. This search **must be** performed not more than 120 days and not less than 60 days prior to filing the report required under Section 717.117, Florida Statutes. A written notice is required to be sent to the apparent owner's last known address informing the apparent owner of the unclaimed property account and requesting that the apparent owner respond to the notice. The holder should provide the name and contact information of the **holder's staff person** to whom the owner can contact if they have any questions. To avoid confusion, the due diligence letter **should not** contain any contact information for the state. See sample due diligence letter in Appendix E on page 52. **(NOTE: The sample letter is provided just as an example and is not a required format.)**

If the apparent owner's address is known to be a "bad" address, the holder must use, but is not limited to, a nationwide database, cross-indexing with other records of the holder, or engaging a licensed agency or company capable of conducting such search and providing updated addresses.

**IMPORTANT – DUE DILIGENCE IS REQUIRED BY LAW FOR ACCOUNTS \$50 OR GREATER. FAILURE TO PERFORM DUE DILIGENCE CAN LEAD TO PENALTIES AND FINES.**

### **1.3.4 Do holders need to report items under \$50?**

Yes, except in the below cases.

- Section 717.117(1)(f), Florida Statutes, provides that any person or business association or public corporation holding funds presumed unclaimed and having a total value of \$10 or less may file a zero balance report for that reporting period.
- Section 717.117(1)(h), Florida Statutes, provides that **credit balances, customer overpayments, security deposits and refunds** having a value of less than \$10 are not presumed unclaimed. If a property is one of these four property types with a value of less than \$10, Florida law provides that the individual property is not reportable.

Section 717.117(1)(d), Florida Statutes, provides that reportable items under \$50 may be reported in an **"AGGREGATE"** to simplify reporting. **Securities related property (SC property type codes) cannot be reported in the aggregate.**

- Aggregate items are those properties where the amount is less than \$50 or properties where the owner is unknown, regardless of the amount. In both cases, the items are totaled into one amount and reported as "AGGREGATE".
- These **"AGGREGATE" totals should be grouped by property type codes.** On the unclaimed property report, list all items reportable in the "AGGREGATE" first. Aggregate property type codes XX99 (eg. AC99, MS99, etc.) **are not** acceptable property type codes.

The holder is not required to report items in the aggregate. The holder can elect to list each individual property.

**NOTE: If an owner comes forward to claim a property reported in the aggregate, the holder will be contacted by the Department to verify if the owner was part of the aggregate property. This process can be simplified by with the holder sending an additional document with the report listing each owner and owner information that makes up the aggregate. This information is maintained with the filed report and is referred to if an owner comes forward to claim a property reported in the aggregate.**

### **1.3.5 Do holders have to file a “zero” report if the holder has never filed or if the holder has no unclaimed property to report?**

Each year all holders that have previously been subject to Chapter 717 or who are currently subject to Chapter 717 are required to file an unclaimed property report with the Department unless written justification has been received by the Department from the holder stating, but not limited to, the reasons listed below. **(This includes zero reports if the entity is holding no unclaimed property and has nothing to report.)**

- a. The holder is located outside Florida and does not conduct business in Florida in its day-to-day operations; or
- b. The holder maintains a fiduciary relationship with its clients such as real estate brokers and attorneys and does not, as a normal course of business, maintain unclaimed property.

**If your organization is located outside of Florida, has never been subject to Chapter 717, has never had property to report to the State of Florida and does not conduct business in Florida in its day-to-day operations, then you do not need to file a zero report.**

Pursuant to Chapter 717, F.S., the Department has the authority to audit holders to verify information filed with the Department and/or to audit for unclaimed property that may have not been reported or were under-reported.

### **1.3.6 When are Unclaimed Property Reports Due to Florida?**

The unclaimed property annual report must be filed before May 1 of each year. The report shall apply to the preceding calendar year. The report must include all property that has gone unclaimed for the required dormancy period, as of the preceding December 31 (ex. An outstanding accounts payable check dated September 24, 2003, would reach its five year dormancy period on September 24, 2008, become reportable as of December 31, 2008, and be reported and remitted to the Department by April 30, 2009. An outstanding payroll check dated January 5, 2007 would reach its one year dormancy period on January 5, 2008, become reportable as of December 31, 2008, and also be reported and remitted to the Department by April 30, 2009). See Appendix D on pages 49-51 for property types and the corresponding property type codes and dormancy periods.

**NOTE – All property held by courts and government entities regardless of the property type have a one year dormancy period.**

Full Remittance (cash and securities) must be enclosed with report, with the exception of safe deposit box contents which are due 120 days after the report due date. Please make your check payable to “Florida Department of Financial Services” and all security certificates should be registered to the “Florida Department of Financial Services” (See Section 2.2.2 on page 16 and in Section 2.3.2.2 on page 37 for detailed securities remittance instructions).

**NOTE – The holder can be subject to penalties if the report and remittance are not received by the required due date.**

### **1.3.7 How to File an Unclaimed Property Report?**

Section 717.117(1), Florida Statutes, requires that an unclaimed property report identifying 25 or more different apparent owners **must be** submitted by the holder via electronic medium. An unclaimed property

report identifying less than 25 apparent owners can be submitted by electronic medium or on the Department forms.

- **DFS-UP-111 Cover Sheet** – must be included with the submission of the unclaimed property report (regardless of whether a holder files manually or electronically). Information on the DFS-UP-111 Cover Sheet can be found in Section 2.1 on page 11 of this manual.
- **Filing Manually on Department Forms** - Complete and mail the applicable Department forms. These forms and instructions can be found in Section 2.2 starting on page 13 of this manual. The Department reporting forms can also be printed from our web page at [www.fltreasurehunt.org](http://www.fltreasurehunt.org). Click on the **Reporting Unclaimed Property** link. Under the Reporting Links and Information section, click on the **Paper Reporting Forms** link. The Department Forms can only be used if the holder is reporting less than 25 properties.
- **Filing Electronically on Electronic Medium** – Electronic medium is required when holder is reporting 25 or more properties. The NAUPA standard file format is required. The Department accepts electronic reports in NAUPA standard format via diskette or CD. HRS PRO is a NAUPA format software program and may be downloaded for free from our web page at [www.fltreasurehunt.org](http://www.fltreasurehunt.org). Click on the **Reporting Unclaimed Property** link. Under the Reporting Links and Information Section, click on the **Holder Reporting Software and Instructions** link. The Holder Reporting Software Instructions can also be found in Section 2.3 starting on page 28 of this manual.

The Department **does not** provide pre-formatted diskette(s) or CD-ROM(s) for use by the holder. The Department encourages, but does not require, that computer generated reports (i.e. printouts) of the accounts reported be sent along with the diskette(s) or CD-ROM(s).

### 1.3.8 Where to send the Florida Unclaimed Property Report

Mail the unclaimed property report along with the remittance for unclaimed property due to Florida to:

Florida Department of Financial Services  
Bureau of Unclaimed Property – Reporting Section  
P.O. Box 1990  
Tallahassee, FL 32302-1990

For holders who overnight express the unclaimed property report along with the remittance for unclaimed property due to Florida, please use the following address:

Florida Department of Financial Services  
Bureau of Unclaimed Property – Reporting Section  
200 E. Gaines Street, Larson Bldg.  
Tallahassee, FL 32399-0358

## 1.4 CAN HOLDER REQUEST AN EXTENSION OF THE REPORT DUE DATE?

Upon written request, the Department may postpone the reporting date or extend the property delivery date for a period of up to sixty (60) days for, but not limited to the following reasons:

- a. Natural disasters;
- b. Acts of war or terrorism;
- c. Report to be filed by the holder or its subsidiaries using an electronic medium for the first time; or
- d. Significant changes in personnel.

Extensions for the reason set forth above shall be granted for one reporting period only within a three year time frame from the date of the first extension.

The holder must submit a request in writing to the Department, at least 30 days prior to the April 30<sup>th</sup> due date, in order to be eligible for an extension of the unclaimed property reporting date. The request must contain the holder name, holder number, if known, the company FEIN and the reason for the extension request. Send the request to the attention of the Compliance Section at the below address.

Florida Department of Financial Services  
Bureau of Unclaimed Property – Compliance Section  
P.O. Box 1990  
Tallahassee, FL 32302-1990

Extension requests may also be sent by e-mail to [EReporting@MyFloridaCFO.com](mailto:EReporting@MyFloridaCFO.com) or by fax to (850) 413-3018.

### **1.5 WHAT TO DO IF ADDITIONAL ITEMS ARE AFTER REPORT IS FILED.**

The holder should file a supplemental report, following the same process as the original report. Please be aware, supplemental reports delivered after the April 30 deadline are subject to late filing and interest penalties.

### **1.6 WHAT IF A HOLDER HAS QUESTIONS REGARDING THE REPORTING OF UNCLAIMED PROPERTY?**

Contact the Department by telephone, fax or e-mail. The telephone number is (850) 413-5522; the fax number is (850) 413-3018; and the e-mail address is [EReporting@MyFloridaCFO.com](mailto:EReporting@MyFloridaCFO.com).

The Compliance Section periodically conducts Unclaimed Property workshops to help educate the holder community in reporting unclaimed property. For more information, please visit our web page at [www.fltreasurehunt.org](http://www.fltreasurehunt.org) and click on the Events link to see scheduled workshops or contact the Compliance Section at (850) 413-5522 for more information

### **1.7 HOW LONG SHOULD A HOLDER RETAIN RECORDS RELATING TO THE UNCLAIMED PROPERTY?**

Section 717.1311(1), Florida Statutes, requires holders to retain records of unclaimed property for five (5) years after the property was reportable. The Department would recommend keeping records of your compliance to the law for ten (10) years in case of an audit.

### **1.8 CAN THE HOLDER REPORT UNCLAIMED PROPERTY DUE TO OTHER STATES THROUGH FLORIDA?**

The Department strongly recommends that holders submit any unclaimed property due to others states directly to that state. However, the Department will permit the reporting of incidental unclaimed property from entities (holders) located in Florida for properties with owners which have a last known address in other states. **Incidental** unclaimed property means **ten or fewer properties, totaling \$1,000 or less**, which belong to a state other than the state to which the properties were remitted.

**Not all states adhere to this practice**; therefore, the Department highly recommends you review the Reciprocity Matrix. The Reciprocity Matrix provides current state unclaimed property reciprocity/exchange practices and can be found on our web page at [www.fltreasurehunt.org](http://www.fltreasurehunt.org). Click on the **Reporting Unclaimed Property** link. Under the Reporting Links and Information section, click on the **Reciprocity/Exchange Information** link and then click on the **Reciprocity Matrix** link.

## **1.9 SPECIAL NOTE TO HOLDERS REPORTING UNCLAIMED PROPERTY HELD OR OWING UNDER ANY LIFE OR ENDOWMENT INSURANCE POLICY OR ANNUITY CONTRACT**

Section 717.117(1)(b), Florida Statutes, provides that “For unclaimed funds which have a value of \$50 or more held or owing under any life or endowment insurance policy or annuity contract, the full name, FEIN or social security number, date of birth, if known, and last known address of the insured or annuitant and of the beneficiary according to records of the insurance company holding or owing the funds” must be included with the unclaimed property report submitted to the Department.

**This information is in addition to the owner information provided by the holder on the DFS-UP-121 form or the electronic file.** If you are reporting on the Department forms, you can include a separate spreadsheet with this information with the reporting package.

If you are reporting in electronic format, the information should be reported as detailed in Section 2.3.2.3. on page 38 of this manual.

## 2. HOLDER REPORTING METHODS, FORMS & INSTRUCTIONS

Section 2 of this manual provides detailed information on the requirements and forms for reporting unclaimed property to the State of Florida. The Department requires that holders of unclaimed property report manually on the Department forms or by an electronic medium (diskette or CD-ROM). In either case, the holder report must be accompanied by a DFS-UP-111 Cover Sheet.

Section 717.117(1), Florida Statutes, provides that a report identifying 25 or more different apparent owners must be submitted by the holder via electronic medium (diskette or CD-ROM). Reports not adhering to these requirements will be returned to the holder and be subject to penalties. For reporting via electronic medium, see Section 2.3 on page 28.

### 2.1 DFS-UP-111 COVER SHEET

#### **THE DEPARTMENT'S COVER SHEET IS REQUIRED TO BE SUBMITTED WITH ALL DEPARTMENT FORMS AND ELECTRONIC REPORTS.**

The DFS-UP-111 Cover Sheet is a Department created form that must be submitted with the Department forms or electronic file. The Cover Sheet contains the current information on a holder that is registered in our unclaimed property database and has been assigned a Florida holder number. The Cover Sheet includes the summary totals for Cash, Securities and Safe Deposit Boxes from either the Department forms or the electronic file.

The holder should confirm the information on the Cover Sheet prior to submitting the unclaimed property reporting package. Please make the necessary name and address changes on this form by drawing a single line through the printed information and writing/typing the new information to the immediate right. Please provide the **e-mail address** of the contact person so that future correspondence can be provided via e-mail.

**If the holder is currently in our unclaimed property database, then the holder can create the DFS-UP-111 Cover Sheet on from our web page** at [www.fltreasurehunt.org](http://www.fltreasurehunt.org) under the Reporting Unclaimed Property link. The holder can produce the form by either using the assigned Florida holder number or by the holder's FEIN along with the state assigned FEIN extension number. If the holder is not currently in the unclaimed property database or has problems with the web page, please contact the Department for assistance. The contact telephone number is (850) 413-5522 and the fax number is (850) 413-3018. You can also send an e-mail to [EReporting@MyFloridaCFO.com](mailto:EReporting@MyFloridaCFO.com).

**NOTE: When creating the DFS-UP-111 Cover Sheet from our web page, please verify that the holder information (holder number, name, address, etc.) on the Cover Sheet is for your organization. Contact the Department if any assistance is needed.**

An example of a DFS-UP-111 Cover Sheet is shown below.



**ALEX SINK**  
**CHIEF FINANCIAL OFFICER**  
**STATE OF FLORIDA**  
 Florida Department of Financial Services

**Current Holder Information:**

**TEST HOLDER**  
**CONTACT NAME**  
**XXXXXX**  
**XX, FL XXXXX**

**Vendor Number: F 00-0012345**

**HOLDER NUMBER: 12345**  
**HOLDER SIC: 999999**  
**SIC DESC: Transfer**  
**Agents/securities Related**  
**Phone: (111)111-1111**  
**Fax: (222)222-2222**

COVER SHEET FOR ANNUAL REPORT OF PROPERTY PRESUMED ABANDONED

For Report Period Ending: **December 31, 2007**

(Please make necessary corrections to Name & Address on this form)

STATE OF INCORPORATION : \_\_\_\_\_ DATE OF INCORPORATION : \_\_\_\_\_

I, **CONTACT NAME**, state that I have caused to be prepared and have examined this report of property presumed abandoned, under Chapter 717, Florida Statutes, for the period as stated, and have enclosed a remittance check for the total amount of items reportable made payable to DEPARTMENT OF FINANCIAL SERVICES. That I am duly authorized by the holder herein to execute this report; and I believe this report is true, correct and complete as of this date, except for such property as has since ceased to be abandoned.

This report consists of:

(a) TOTAL OF CASH ITEMS REPORTED AND REMITTED (Form DFS-UP-121): \$ \_\_\_\_\_

(b) TOTAL SHARES OF STOCK REPORTED (Form DFS-UP-128): \_\_\_\_\_

(c) TOTAL NUMBER OF SAFE DEPOSIT BOXES REPORTED (Form DFS-UP-129): \_\_\_\_\_

(d) INDICATE MEDIA TYPE USED FORMS: \_\_\_\_\_

DISKETTE: \_\_\_\_\_

\_\_\_\_\_  
 Signature Date

\_\_\_\_\_  
 Title Telephone Number

**Mail to:**  
**DEPARTMENT OF FINANCIAL SERVICES**  
**STATE OF FLORIDA**  
**Bureau of Unclaimed Property**  
**P.O. Box 1990**  
**Tallahassee, FL 32302-1990**  
**(850)413-5522**

## 2.2 DEPARTMENT FORMS TO BE USED IN REPORTING UNCLAIMED PROPERTY

### 2.2.1 DFS-UP-121 for Cash Items

**THIS FORM IS REQUIRED FOR ALL MANUAL REPORTS. This form is used to list the ‘Cash’ amounts due for owners. (See Form on page 14). Section 717.117(1), Florida Statutes, requires that if a holder is reporting 25 or more different apparent owners, then the holder must file their report via computer diskette or CD-ROM.**

Section 717.117(1)(d), Florida Statutes, provides that items under \$50 may be reported in an “**AGGREGATE**” amount to simplify reporting.

List all items reportable in the aggregate first. **Aggregate totals should be grouped by property type.** Aggregate property type codes XX99 (eg. AC99, MS99, etc.) **are not** acceptable property type codes. Next, list all owners with an amount of \$50 or greater.

The holder is not required to report items in the aggregate. The holder can elect to list each individual property.

**NOTE: If an owner comes forward to claim a property reported in the aggregate, the holder will be contacted by the Department to verify if the owner was part of the aggregate property. This process can be simplified by with the holder sending an additional document with the report listing each owner and owner information that makes up the aggregate. This information is maintained with the filed report and is referred to if an owner comes forward for a claim on a property reported in the aggregate.**

The remittance (payment) for these items is due at the same time as the report. This form may be duplicated for reporting up to 25 owners.

**ALL of the columns on the form must be completed. Any incomplete forms will be recorded as non-compliant and will be returned to the holder to correct. Information not known should be marked as “Unknown”.**

**NOTE for all Florida County Clerk of Courts** – for the reporting of unclaimed property covered under other Florida Statutes (For Example: ss. 43.19, 733.816, 732.107, 732.1101, 705.103, 402.17 or 744.534, Florida Statutes) contact the Bureau at 850-413-5522 on obtaining the required form and information on how to report the unclaimed property.

**STATE OF FLORIDA  
ANNUAL REPORT OF PROPERTY PRESUMED ABANDONED**

**MAIL TO:**

State of Florida  
 Department of Financial Services  
 Bureau of Unclaimed Property  
 P O Box 1990  
 Tallahassee, FL 32302-1990  
 (850)413-5522

PURSUANT TO THE FLORIDA DISPOSITION OF UNCLAIMED PROPERTY  
 CHAPTER 717, FLORIDA STATUTES

**Covering UNCLAIMED ITEMS as of December 31,\_\_\_\_\_**

**Holder Number (From DFS-UP-111 Cover Sheet)\_\_\_\_\_**

**Federal Tax Identification Number (FEIN)\_\_\_\_\_**

CASH AMOUNT REPORTED	NAME and LAST KNOWN ADDRESS (Street, City & State) date of birth of owner(s) including all joint/alternate owners, beneficiaries, and relationship LAST NAME FIRST	SSN/FEIN OF OWNER	PROPERTY TYPE CODE	DATE OF LAST TRANSACTION	ACCOUNT/CHECK NUMBER

\$ \_\_\_\_\_ PAGE TOTAL

### 2.2.1.1 DFS-UP-121 FORM DETAIL

- A. Column “CASH AMOUNT REPORTED” - Enter the sum of the cash amount(s) due the owner.
- B. Column “NAME and LAST KNOWN ADDRESS” - Enter the last name, first name and full middle name, if available. Corporate titles and the like should be entered exactly as adopted, except the word “the” should be omitted when it is the first word in the name. **If the owner name is not known, insert “Unknown” as the owner name.** List the last known address, including zip code of the owner as it last appeared in the holder’s records. **Include the address, even when incomplete or erroneous. If no address is available, insert “Address Unknown” beneath the name.** If the property has more than one owner, the names and addresses of the alternate owners must be listed beneath the original owner’s name. **If there is no alternate owner for this account, then the wording “No Alternate Owner” must be entered after each account.**
1. The relationship between the owners must also be shown (A list of valid relationship codes can be found in Appendix A on page 48). Please enter the date of birth, if available. Reports that do not meet this requirement will be returned.
- C. Column “SSN/FEIN OF OWNER” - Enter the social security number of the individual or FEIN for the business of the reported owner of the property. Social security numbers should be reported, specifically for payroll items, bank accounts, and life insurance company and securities holdings. If the alternate owner’s SSN is available, it should also be reported. **If no social security number is available, insert “Unknown” in this column.** Common abbreviations are SSN, FEID, EIN, and TIN.
- D. Column “PROPERTY TYPE CODE” - Enter the property type code of each item. The property type codes are listed in Appendix D on pages 49-51 of this manual. Select the 4-character code that best describes the property being reported.
- E. Column “DATE OF LAST TRANSACTION” - Enter the date the property became payable, redeemable or returnable. This is the date of the vendor check, the date a dividend became payable, the date a note became payable, the date a check or draft was issued, etc. or the last date there was **positive** contact from the owner regarding the property.

**The Date of Last Transaction is not the date of the holder’s due diligence letter. Please make sure that all reported accounts have reached their statutory dormancy period.**

- F. Column “ACCOUNT/CHECK NUMBER” - Enter the identifying number of each item such as check number, account number, employee number, etc. This number is not the holder number or federal employer identification number.

**SPECIAL NOTE to holders reporting unclaimed property held or owing under any life or endowment insurance policy or annuity contract:** Section 717.117(1)(b), Florida Statutes, provides that “For unclaimed funds which have a value of \$50 or more held or owing under any life or endowment insurance policy or annuity contract, the full name, FEIN or social security number, date of birth, if known, and last known address of the insured or annuitant and of the beneficiary according to records of the insurance company holding or owing the funds” must be included in the unclaimed property report submitted to the Department. This information is in addition to the owner information provided by the holder on the DFS-UP-121 form or the electronic file. If you are reporting on the Department forms, you can provide this information separately and include with the reporting package.

## 2.2.2 DFS-UP-128 for Securities

**THIS FORM IS REQUIRED FOR ALL MANUAL REPORTS. This form is used to list the “common or preferred stock, bonds, debentures, or mutual funds” due for owners. (See Form on page 17). Section 717.117(1), Florida Statutes, requires that if a holder is reporting 25 or more different apparent owners, then the holder must file their report via computer diskette or CD-ROM.**

**Common or Preferred Stock and Mutual Funds eligible for DTC/DWAC transfer** shall be sent directly to: Smith Barney, Inc.; DTC #0418; c/o Florida Department of Financial Services; Acct. # 448-90002-18 005 (If assistance is needed for DTC/DWAC transfers, please contact Beverly Avera at Smith Barney 229/244-0310). A list of the securities transferred must be faxed to the BUP at 850/413-3017 (Attn: Unclaimed Property Asset Management/Securities Processing) on the day the transfer is requested. **Please include the holder number on the fax.** The Department’s FEIN is 59-6001874. Indicate in the fax that the shares have been transferred via DTC to the department’s account. **A copy of the fax should accompany the unclaimed property report sent to the Department.**

**Dividend reinvestment plans should be terminated** by converting the whole shares to common stock and liquidating the partial shares. The whole shares can then be sent via DTC to: Smith Barney, Inc.; DTC #0418; c/o Florida Department of Financial Services; Acct. # 448-90002-18 005. The proceeds for partial shares can be mailed to the Florida Department of Financial Services, Attn: Bureau of Unclaimed Property, 200 East Gaines St, Tallahassee, FL 32399

**Direct Registration/Book-Entry shares are no longer accepted by the Department.** These issues of common stock should be transferred via DTC to: Smith Barney, Inc.; DTC #0418; c/o Florida Department of Financial Services; Acct. # 448-90002-18 005. If the securities cannot be sent via DTC, physical certificates should be issued to the Department and mailed to the Florida Department of Financial Services, Attn: Bureau of Unclaimed Property, 200 East Gaines St, Tallahassee, FL 32399

**Securities remitted by certificate** should be registered in the name of “Florida Department of Financial Services” (FLDFS) and mailed to the Florida Department of Financial Services, Attn: Bureau of Unclaimed Property, 200 East Gaines St, Tallahassee, FL 32399.

**To transfer securities not eligible for DTC** by establishing an account in the name of Florida Department of Financial Services (This option should only be used as a last resort):

- 1) Establish an account in the name of Florida Department of Financial Services (Prior approval from the Department is not necessary)
- 2) Mail the statement to the Florida Department of Financial Services, Attn: Bureau of Unclaimed Property, 200 East Gaines St, Tallahassee, FL 32399. The statement must include:
  - a) issue name
  - b) contact information for issuer
  - c) account number
  - d) name and address for whom issues are registered
  - e) transaction information

**NOTE: If the Department does not receive an account statement with the report, it will necessitate additional correspondence from the Department, which may be time consuming for both parties. PLEASE DO NOT SEND SCREEN PRINTS AS A SUBSTITUTE FOR AN ACCOUNT STATEMENT.**

**ALL of the columns on the form must be completed. Any not completed will be recorded as non-compliant and will be returned to the holder to correct. Information not known should be marked as “Unknown”.**

**STATE OF FLORIDA  
ANNUAL REPORT OF PROPERTY PRESUMED ABANDONED**

**FOR SECURITIES**

**MAIL TO:**

State of Florida  
Department of Financial Services  
Bureau of Unclaimed Property  
P O Box 1990  
Tallahassee, FL 32302-1990  
(850) 413-5522

PURSUANT TO THE FLORIDA DISPOSITION OF UNCLAIMED PROPERTY  
CHAPTER 717, FLORIDA STATUTES

Covering **UNCLAIMED ITEMS** as of December 31, \_\_\_\_\_

Holder Number (From DFS-UP-111 Cover Sheet) \_\_\_\_\_

Federal Tax Identification Number (FEIN) \_\_\_\_\_

NUMBER OF SHARES REPORTED	NAME and LAST KNOWN ADDRESS (Street, City & State) date of birth of owner(s) including all joint/alternate owners, beneficiaries, and relationship LAST NAME FIRST	SSN/FEIN OF OWNER	PROPERTY TYPE CODE	DATE OF LAST TRANS- ACTION	ACCOUNT NUMBER	ISSUE OF STOCK AND CUSIP NUMBER

### 2.2.2.1 DFS-UP-128 FORM DETAIL

- A. Column “NUMBER OF SHARES REPORTED” - Enter the sum of the shares, by issue, due the owner. Multiple issues for the same owner will require separate entries on the form.
- B. Column “NAME AND LAST KNOWN ADDRESS” – Enter the last name, first name and full middle name, if available. Corporate titles and the like should be entered exactly as adopted, except the word “the” should be omitted when it is the first word in the name. **If the owner name is not known, insert “Unknown” as the owner name.** List the last known address, including zip code of the owner as it last appeared in the holder’s records. **Include the address, even when incomplete or erroneous. If no address is available, insert “Address Unknown” beneath the name.** If the property has more than one owner, the names and addresses of the alternate owners must be listed beneath the original owner’s name. **If there is no alternate owner for this account, then the wording “No Alternate Owner” must be entered after each account.**
1. The relationship between the owners must also be shown (A list of valid relationship codes can be found in Appendix A on page 48). Please enter the date of birth, if available. Reports that do not meet this requirement will be returned.
- C. Column “SSN/FEIN OF OWNER” – Enter the social security number of the individual or FEIN for the business of the reported owner of the property. Social security numbers must be reported for securities holdings. If the alternate owner’s SSN is available, it should also be reported. **If no social security number is available, insert “Unknown” in this column.** Common abbreviations are SSN, FEID, EIN, and TIN.
- D. Column “PROPERTY TYPE CODE” - Enter the property type code of each item. The property type codes are listed in Appendix D on pages 49-51 of this manual. Select the 4-character code that best describes the property being reported. The valid codes for securities are SC08, SC10, SC11, SC14, SC15, SC16, SC17, SC19 and DM02.
- E. Column “DATE OF LAST TRANSACTION” - Enter the date the property became payable, redeemable or returnable. This is the date a dividend became payable, the date of last communication with the owner, or the date that statements and mailings are being returned as undeliverable.
- F. Column “ACCOUNT NUMBER” - Enter the identifying number of each item such as check number, account number, employee number, etc. This number is not the holder number or FEIN.
- G. Column “ISSUE OF STOCK AND CUSIP NUMBER” - The issue name as shown on the certificate including series designation and the CUSIP number for each issue. The stock issue name and CUSIP number is required information that must be included on the report.

**ALL of the columns on the form must be completed. Any not completed will be recorded as non-compliant and will be returned to the holder to correct. Information not known should be marked as “Unknown”.**

### 2.2.3 DFS-UP-129 for Safe Deposit Boxes or Other Safekeeping Repository

Per Section 717.116, Florida Statutes, all tangible and intangible property held by a banking or financial organization in a safe-deposit box or any other safekeeping repository in Florida that has not been claimed by the owner for more than 3 years after the lease or rental period on the box or other repository has expired is presumed unclaimed and should be reported to Florida.

**THIS FORM IS REQUIRED FOR ALL MANUAL REPORTS.** This form is used to list the “safe deposit boxes or other safekeeping repositories” due for owners. (See Form on page 19). **Section 717.117(1), Florida Statutes, requires that if a holder is reporting 25 or more different apparent owners, then the holder must file their report via computer diskette or CD-ROM.**

The Department will only accept tangible property from financial institutions. **The contents may not be delivered to the Department until August 28, 2009. Delivery must be completed by October 27, 2009.**

**DFS-UP-129**

**STATE OF FLORIDA  
ANNUAL REPORT OF PROPERTY PRESUMED ABANDONED**

**FOR SAFE DEPOSIT  
BOXES OR OTHER  
SAFEKEEPING  
REPSITORY**

**MAIL TO:**

State of Florida  
Department of Financial Services  
Bureau of Unclaimed Property  
P O Box 1990  
Tallahassee, FL 32302-1990  
**(850)413-5522**

PURSUANT TO THE FLORIDA DISPOSITION OF UNCLAIMED PROPERTY  
CHAPTER 717, FLORIDA STATUTES

**Covering UNCLAIMED ITEMS as of December 31, \_\_\_\_\_**

**Holder Number (From DFS-UP-111 Cover Sheet) \_\_\_\_\_**

**Federal Tax Identification Number (FEIN) \_\_\_\_\_**

	<b>NAME and LAST KNOWN ADDRESS (Street, City &amp; State) date of birth, of owner(s) including all joint/alternate owners, beneficiaries, and relationship LAST NAME FIRST</b>	<b>SSN/FEIN OF OWNER</b>	<b>PROPERTY TYPE CODE</b>	<b>DATE OF LAST TRANSACTION</b>	<b>BOX NUMBER</b>

### 2.2.3.1 DFS-UP-129 FORM DETAIL

- A. **Column “NAME AND LAST KNOWN ADDRESS”** - Enter the last name, first name and full middle name, if available. Corporate titles and the like should be entered exactly as adopted, except the word “the” should be omitted when it is the first word in the name. **If the owner name is not known, insert “Unknown” as the owner name.** List the last known address, including zip code of the owner as it last appeared in the holder’s records. **Include the address, even when incomplete or erroneous. If no address is available, insert “Address Unknown” beneath the name.** If the property has more than one owner, the names and addresses of the alternate owners must be listed beneath the original owner’s name. **If there is no alternate owner for this account, then the wording “No Alternate Owner” must be entered after each account.**
1. The relationship between the owners must also be shown (A list of valid relationship codes can be found in Appendix A on page 48). Please enter the date of birth, if available. Reports that do not meet this requirement will be returned.
- B. **Column “SSN/FEIN OWNER”** – Enter the social security number of the individual or FEIN for the business of the reported owner of the property. Social security numbers must be reported for securities holdings. If the alternate owner’s SSN is available, it should also be reported. **If no social security number is available, insert “Unknown” in this column.** Common abbreviations are SSN, FEID, EIN, and TIN.
- C. **Column “PROPERTY TYPE CODE”** - Enter the property type code of each item. The property type codes are listed in Appendix D on pages 49-51 of this manual. Select the four-character code, which best describes the property being reported. The valid codes are SD01, SD02, SD03 and SD04.
- D. **Column “DATE OF LAST TRANSACTION”** - Enter the date of the expiration of the lease or rental period on the safe deposit box. This is not the date of the due diligence letter or the date the box was drilled.
- E. **Column “BOX NUMBER”** - The number assigned to the owner identifying their safe deposit box or the number assigned by the holder as the safekeeping repository account number.

**ALL of the columns on the form must be completed. Any not completed will be recorded as non-compliant and will be returned to the holder to correct. Information not known should be marked as “Unknown”.**

### 2.2.3.2 SAFE DEPOSIT BOX REPORTING REQUIREMENTS (IMPORTANT)

- A. The Department has developed, by rule, a **Safe Deposit Box Inventory (UP-DFS-155)** form used to inventory the contents for a safe deposit box. A copy of the notarized form listing the contents must be sent with the annual unclaimed property report (submit to Department by the April 30th due date). A copy of this notarized form listing the contents must also be attached to each owner’s container of contents when sent. **(See Forms on pages 23-27)** Do not send the safe deposit box contents with the initial filing. Only send a copy of the notarized UP-DFS-155 bank inventory form with the initial filing.
- B. A hard copy of the owner’s information reported and delivered must be included with the safe deposit box contents, and should be placed in the shipping container with the contents. In the event the owner claims their safe deposit box contents after the account has been reported, it must be noted adjacent to the owner’s name on the report, which has been included with the contents. The holder shall notify the Department in writing within 120 days of the filing of the report that the safe deposit box contents have either been claimed by the owner or have no commercial value and will not be remitted to the Department by the holder.

- C. Securities, such as common or preferred stock, found in a safe deposit box, which cannot be transferred into the name of “Florida Department of Financial Services” should also be listed on Form DFS-UP-129 or reported electronically as “safekeeping items”.
- D. The Department has developed, by rule, a **Safe Deposit Box Inventory** guideline of numismatic (collectible) U.S. coin and currency. Holders should review this list when determining which cash and currency should be converted to a cashier’s check, as opposed to remitted as found in the owner’s safe deposit box. This guideline is available on our web page at <http://www.fltreasurehunt.org>. Click on the **Reporting Unclaimed Property** link. Under the Reporting Links and Information section, click on the **Numismatic List for Financial Institutions** link.

Cashier’s checks may be issued for paper currency or coins **not of collectible value found in a single safe deposit box or one check may be issued for paper currency and coins found in ALL safe deposit boxes being remitted.**

Monies remitted in this manner must be identifiable with the individual owners from whose safe deposit boxes the money is being remitted. The owner’s safe deposit box inventory sheet should be clearly marked to indicate the coins and paper currency converted to a cashier’s check. Cashiers checks remitted in lieu of face value coins or paper currency must be made payable to “Florida Department of Financial Services” **and be remitted with the safe deposit box contents. The safe deposit contents must be remitted between August 28, 2009 and October 27, 2009.**

### **2.2.3.3 PACKAGING/SHIPPING OF CONTENTS REQUIREMENTS**

- A. Prior to shipping contents of safe deposit boxes, all contents should be reviewed to ensure that only contents meeting the criteria of valuables are being sent.
- B. Pursuant to Section 717.119(5), Florida Statutes, a holder’s safe deposit box contents shall be delivered to the Department in a single shipment. In lieu of a single shipment, holders may provide the Department with a single detailed shipping schedule that includes package-tracking information for all packages being sent. The detailed shipping schedule shall specify the name of the apparent owner previously reported to the Department, the physical address of the safe deposit box whose contents are being remitted, and the name of a person who may be contacted regarding the report and the remittance of the safe deposit box.
- C. All contents must be packaged securely to prevent damage during shipment.
- D. Breakables must be wrapped individually and packed in sturdy shipping containers.
- E. Likewise, heavy items such as large quantities of coins should be placed in cloth coin bags and packed in substantial shipping containers so they will not break open in shipment. If multiple shipping containers are being sent from the same location, each shipping container must be numbered, i.e. 1 of 6, 2 of 6 etc.

**All containers must be marked “DELIVER UNOPENED” in a prominent manner on several sides of the container and mailed to the following address: Department of Financial Services, Bureau of Unclaimed Property, 200 East Gaines Street, Larson Building, Tallahassee FL 32399-0360.**

- F. The container should also include the holder number of the bank as part of the return address on each shipping container.

- G. The delivery of the property to the Department through the U.S. Mail or other carrier **shall** be insured at an amount equal to the estimated value of the property. This requirement is to protect the holder in case the package is lost in transit.

**In accordance with Section 717.119(5)(c), Florida Statutes, the penalty for the receipt of a safe deposit box container after October 27, 2009 and is late 30 days or less, shall be \$100. Thereafter, the penalty shall be \$500 for each additional successive 30-day period. The penalty assessed against a holder shall not exceed \$4,000 annually. The penalty shall be remitted to the Department within 30 days after the date of the notification to the holder that the penalty is due.**



**ALEX SINK  
CHIEF FINANCIAL OFFICER  
STATE OF FLORIDA**

Florida Department of Financial Services

**SAFE DEPOSIT BOX INVENTORY FORM  
OF PROPERTY PRESUMED UNCLAIMED**

**MAIL CONTENTS TO:**

State of Florida  
Department of Financial Services  
Bureau of Unclaimed Property  
200 East Gaines Street  
Tallahassee, FL 32399-0360

**Mark Shipping Carton "Deliver Unopened"**

Holder Number (From DFS-UP-111 Cover Sheet) \_\_\_\_\_

Federal Tax Identification Number (FEIN) \_\_\_\_\_ Branch # \_\_\_\_\_

Branch Location/Address \_\_\_\_\_

Owner's Name \_\_\_\_\_

Owner's Address \_\_\_\_\_

Safe Deposit Box # \_\_\_\_\_ Date Drilled \_\_\_\_\_ Rent Due\$ \_\_\_\_\_

Drilling Fee\$ \_\_\_\_\_ Prepared By \_\_\_\_\_ Date Prepared \_\_\_\_\_

Operations Officer \_\_\_\_\_ Date Prepared \_\_\_\_\_

Date Claimed By Owner \_\_\_\_\_ Owner's Signature \_\_\_\_\_

Witnessed By \_\_\_\_\_ Date \_\_\_\_\_

Y/M = Yellow Metal

W/M = White/Silver Colored Metal

CONVERT ALL FACE VALUE MONIES TO CHECK PAYABLE TO:

DEPARTMENT OF FINANCIAL SERVICES

QTY	SB 01 - JEWELRY DESCRIPTION	QTY	SB 13 - U.S. GOLD	QTY	SB 08 - NUMISMATIC US BILLS
	Y/M NECKLACE (S)		U.S. PROOF / MINT SET (S)		U.S. \$10,000.00 BILL (S)
	Y/M NECKLACE W/PENDANT (S)		TOTAL OF COINS IN SETS		U.S. \$1,000.00 BILL (S)
	Y/M NECKLACE W/STONE (S)		U.S. \$50.00 GOLD COIN (S)		U.S. \$500.00 BILL (S)
	Y/M NECKLACE W/PEARL LIKE BEADS		U.S. \$20.00 GOLD COIN (S)		U.S. \$100.00 BILL (S)
	Y/M RING (S)		U.S. \$10.00 GOLD COIN (S)		U.S. \$50.00 BILL (S)
	Y/M RING W/STONE (S)		U.S. \$5.00 GOLD COIN (S)		U.S. \$20.00 BILL (S)
	Y/M RING W/BEAD (S)		U.S. \$2-1/2 GOLD COIN (S)		U.S. \$10.00 BILL (S)
	Y/M BRACELET (S)		U.S. \$1.00 GOLD COINS		U.S. \$5.00 BILL (S)
	Y/M BRACELET W/STONE (S)		U.S. GOLD PROOF/MINT SET		U.S. \$2.00 BILL (S)
	Y/M BRACELET W/CHARM (S)		TOTAL # OF COINS (IN SET)		U.S. \$1.00 BILL (S)
	BRACELET W/PEARL LIKE BEAD (S)		U.S. PLATINUM COIN (S)	QTY	SB08-FRACTIONAL CURRENCY
	Y/M PIN / BROOCH (S)				CONFEDERATE \$1000 BILL (S)
	Y/M PIN / BROOCH W/STONE (S)	QTY	SB 03-NUMISMATIC COINS		CONFEDERATE \$500 BILL (S)
	Y/M PIN / BROOCH W/BEAD (S)		U.S. COINS & COIN BOOKS		CONFEDERATE \$100 BILL (S)
	Y/M CHARM / PENDANT (S)		U.S. 1-DOLLAR COIN (S) LOOSE		CONFEDERATE \$50.00 BILL (S)
	Y/M PAIR OF CUFFLINKS		U.S. 1-DOLLAR ROLL (S)		CONFEDERATE \$20.00 BILL (S)
	Y/M SINGLE CUFFLINK (S)		U.S. 1-DOLLAR PARTIAL ROLL(S)		CONFEDERATE \$10.00 BILL (S)
	Y/M CAMEO STYLE PIN/PENDANT		U.S. 1-DOLLAR COIN BOOK (S)		CONFEDERATE \$5.00 BILL (S)
	W/M CAMEO STYLE PIN/PENDANT		TOTAL # OF COINS IN BOOKS		CONFEDERATE \$ 2.00 BILL (S)
	Y/M PAIR OF EARRINGS				CONFEDERATE \$1.00 BILL (S)
	Y/M PAIRS EARRINGS W/STONE (S)		U.S. 50-CENT COIN (S) LOOSE		
	Y/M SINGLE EARRING (S)		U.S. 50 CENT COIN ROLL (S)		
	Y/M SINGLE EARRING W/STONE (S)		U.S. 50 CENT PARTIAL ROLL (S)	QTY	SB 09-FOREIGN PAPER CURRENCY
	GEM STONE (S)		U.S. 50-CENT COIN BOOK (S)		
	W/M NECKLACE (S)		TOTAL # OF COINS IN BOOKS		
	W/M NECKLACE W/PENDANT (S)			QTY	SB 10-FOREIGN COIN (S)
	W/M NECKLACE W/STONE (S)		U.S. 25-CENT COIN (S) LOOSE		
	W/M RING (S)		U.S. QUARTER ROLL (S)		
	W/M RING W/STONE (S)		U.S. QUARTER PARTIAL ROLL(S)	QTY	SB 14-FOREIGN GOLD COIN (S)
	W/M BRACELET (S)		U.S. 25-CENT COIN BOOK (S)		
	W/M BRACELET W/STONE (S)		TOTAL # OF COINS IN BOOKS		
	W/M BRACELET W/CHARM (S)				
	W/M PIN / BROOCH (S)		U.S. 10-CENT COIN (S) LOOSE	QTY	SB 15-FACE VALUE MONIES
	W/M PIN/BROOCH W/STONE (S)		U.S. 10-CENT COIN ROLL (S)		\$100.00 BILLS F/V (S)
	W/M CHARM/PENDANT (S)		U.S. 10-CENT PARTIAL ROLL (S)		\$50.00 BILLS F/V (S)
	W/M SINGLE CUFFLINK (S)		U.S. 10-CENT COIN BOOK (S)		\$20.00 BILLS F/V (S)
	W/M PAIR OF CUFFLINK (S)		TOTAL # OF COINS IN BOOKS		\$10.00 BILLS F/V (S)
	W/M PAIR OF EARRINGS				\$5.00 BILLS F/V (S)
	W/M PAIR EARRINGS W/STONE (S)		U.S. 5-CENT COIN (S) LOOSE		\$1.00 BILLS F/V (S)
	W/M SINGLE EARRING (S)		U.S. 5-CENT COIN ROLL (S)		\$0.50 CENT COIN (S) F/V
	W/M SINGLE EARRING W/STONE (S)		U.S. 5-CENT PARTIAL ROLL (S)		\$0.25 CENT COIN (S) F/V
	MISC. JEWELRY PIECE (S)		U.S. 5-CENT COIN BOOK (S)		\$0.10 CENT COIN (S) F/V
	EARRING BACK (S), CLASP (S), ETC		TOTAL # OF COINS IN BOOKS		\$0.05 CENT COIN (S) F/V
	TIE TACK (S) & TIE CLIP (S)				\$0.01 CENT COIN (S) F/V
	TUXEDO BUTTON (S) / STUD (S)		U.S. 1-CENT (S) (PENNY)		CONVERT TO CHECK
	MISC. PIN (S)		U.S. 1-CENT PENNY ROLL (S)		
	MISC. NECKLACE (S)		U.S. 1-CENT PARTIAL ROLL (S)		
	BRACELET (S)		U.S. 1-CENT PENNY BOOK (S)		
			TOTAL # OF COINS IN BOOKS		

QTY	SB 02 - WATCHES	QTY	SB 07 - MISCELLANEOUS VALUABLES	QTY	SB 07 -- MISCELLANEOUS VALUABLES
	Y/M WATCH W/BAND (S)		ARROW HEAD (S)		SILVER CANDLE HOLDER
	Y/M WATCH W/STONE (S)		BASEBALL (S)		SILVER FORK (S)
	Y/M WATCH NO BAND (S)		BASEBALL CARD (S)		SILVER INGOT (S)
	Y/M POCKET WATCH (S)		BELT BUCKLE (S)		SILVER KNIFE / KNIVES
	Y/M POCKET WATCH W/CHAIN (S)		BEZEL (S) COIN, JEWELRY		SILVER MEDALLION (S)
	Y/M POCKET WATCH W/CHAIN &		BINOCULARS		SILVER SERVING PIECE (S)
	<b>POCKET KNIFE</b>		CALCULATOR (S)		<b>SILVER SET (S) (# OF PIECES)</b>
	<b>MISC. WATCH PARTS, BEZELS,</b>		CAMERA (S)		SILVER SPOON (S)
	<b>BANDS. LINKS, ETC.</b>		CARVED PIECES		SILVER TRAY (S)
	WATCH CHAIN (S)		CHANGE PURSE OR PURSE		SOUVENIR SPOON (S)
	W/M WATCH W/BAND (S)		CLOCK (S)		SPORTS MEMORABILIA
	W/M WATCH W/STONE (S)		<b>COMM. MEDALLION SET (S)</b>		SWEATER GUARD (S)
	W/M WATCH NO BAND (S)		<b>TOTAL # OF MEDALLIONS</b>		THIMBLE (S)
	W/M POCKET WATCH (S)		COMMEMORATIVE MEDALLION		U.S. STAMP (S)
	W/M POCKET WATCH W/CHAIN (S)		COMPACT (S)		<b>U.S. STAMP BOOK (S)</b>
	W/M POCKET WATCH W/CHAIN &		EYE GLASSES		<b># OF STAMPS IN BOOKS</b>
	<b>POCKET KNIFE</b>		FOREIGN STAMP (S)		W/M KEY CHAIN (S)
			<b>FOREIGN STAMP BOOK (S)</b>		W/M LIGHTER (S)
			<b># OF STAMPS IN BOOK (S)</b>		W/M MONEY CLIP (S)
			GOLD BAR (S)		WALLET (S)
<b>QTY</b>	<b>SB 12 - U.S. SAVINGS BONDS</b>		GOLD CAPPED TOOTH / TEETH		WAR MEDAL (S)
	U.S. SAVINGS BOND (S) \$10,000.00		HARMONICA (S)		WHISTLE (S)
	U.S. SAVINGS BOND (S) \$1,000.00		HISTORICAL DOCUMENT (S)		Y/M KEY CHAIN (S)
	U.S. SAVINGS BOND (S) \$500.00		KNIFE / KNIVES		Y/M LIGHTER (S)
	U.S. SAVINGS BOND (S) \$100.00		<b>MANICURE SET (S)</b>		Y/M MONEY CLIP (S)
	U.S. SAVINGS BOND (S) \$75.00		<b>TOTAL # OF PIECES IN SET</b>		
	U.S. SAVINGS BOND (S) \$50.00		MILITARY PIN (S)		
	U.S. SAVINGS BOND (S) \$25.00		MISC. BOOK (S) ALL KINDS		
			MISC. BOTTLES, PERFUME, PILL,		
			MISC. BUTTON (S)		
<b>QTY</b>	<b>SB 05-BONDS (NOT SAVINGS BONDS)</b>		MISC. DAMAGED COIN (S)		
	OTHER BONDS Example (State of Isreal)		MISC. PIN (S)		
	BEARER BONDS		MISC. SHELL (S)		<b>SB 06 – PERSONAL DOCUMENTS</b>
			MISC. TOKEN (S)		
			<b>MISCELLANEOUS BOXES (PILL,</b>		
			<b>WOOD, TIN, GLASS, JEWELRY)</b>		
			MISC. ROCK (S)/STONE (S)		
			MISC. SILVER PIECE (S)		
			MUSIC BOX (S)		
			NAPKIN RING (S)		
			OLD MAGAZINE, COLLECTABLE		
			OLD NEWSPAPER, COLLECTABLE		
			PEN/PENCIL (S)		
<b>QTY</b>	<b>SB 11 - CHECKS</b>		<b>PEN-PENCIL SET / REFILLS</b>		
	CERTIFICATE (S) OF DEPOSIT		<b>NUMBER OF PIECES</b>		
	TRAVELER'S CHECK (S)		PICTURE (S), PAINTING (S)		
	THIRD PARTY CHECK (S)		POCKET KNIFE / KNIVES		
	OTHER CHECK (S)		PRAYER BEADS (ROSARY) (S)		
			SILVER BOWL (S)		
			MISC. SOUVENIR'S		
			KEY (S)		
			LETTER OPENER (S)		





**ALEX SINK  
CHIEF FINANCIAL OFFICER  
STATE OF FLORIDA**

Florida Department of Financial Services

**GUIDELINES FOR USING SAFE DEPOSIT BOX**

**BANK INVENTORY FORM DFS-UP-155**

In the past, financial institutions have used their own version of bank inventory forms for the inventory of unclaimed safe deposit box contents. Further, trying to capture the exact description of an item can be difficult and time consuming. This form is made available to financial institutions to assist them in the inventory of unclaimed safe deposit box contents. It is designed to capture pertinent information. The categories listed are followed by a brief description of the contents. In the event a description is not listed, a description may be inserted at the bottom of the category that best fits the item. For example: A safe deposit box containing 3 rings with different colored stones has been described as (1-yellow metal ring with green stone, 1-yellow metal ring with brown stone, 1-yellow metal ring with clear stone). With this inventory list, bank employees may report 3-yellow metal rings with stones. If you prefer to list out the items, use the last page of the inventory sheet. Reminder, please write your descriptions legibly.

If you should have any questions, please contact the Department of Financial Services, Bureau of Unclaimed Property, by phone (850) 413-5749.

## 2.3 GENERAL INSTRUCTIONS FOR ELECTRONIC REPORTING

**Section 717.117(1), Florida Statutes, requires that a report identifying 25 or more different apparent owners must be submitted via electronic medium (Diskette or CD-ROM).**

The Department of Financial Services requires that all reports be submitted in the new NAUPA standard format for the electronic filing of unclaimed property information. The National Association of Unclaimed Property Administrators ("NAUPA") is an organization of all fifty states dedicated to developing uniform laws and the protection of the owners of unclaimed property.

### 2.3.1 GENERAL INFORMATION

With the electronic filing of the annual unclaimed property report, the diskette or CD-ROM file replaces the Department forms DFS-UP-121, DFS-UP-128, and DFS-UP-129. **However, the DFS-UP-111 cover sheet MUST be completed and submitted with the diskette/CD-ROM (See Section 2.1 on page 11).**

**Please be aware that we are enforcing our policy of returning the diskette/CD-ROM to holders if they do not conform to the standard format or if the disk/CD-ROM contains erroneous data.**

If the diskette/CD-ROM does not conform to the standard format, a cover letter will accompany the diskette/CD-ROM being returned to the holder. This letter will indicate the reason the disk/CD-ROM could not be processed. Your full cooperation in adhering to these instructions is vital to the successful processing of your diskette/CD-ROM. Failure to comply could lead to the Department taking administrative actions against the holder. Please mail your completed Form DFS-UP-111 Cover Sheet, remittance check, and diskette or CD-ROM to the following address:

Department of Financial Services  
Bureau of Unclaimed Property  
P O Box 1990  
Tallahassee, FL 32302-1990

Holders may send their holder reports using any of the following media:

- 3.5" Diskette
- CD-ROM

**The Department encourages, but does not require, holders to include paper printouts of the file to assist in correcting MINOR errors.**

Florida will not be returning diskettes or CD-ROMS after processing of the annual report. These physical units will be retained as record of the original information submitted by the holder for their annual report of property presumed abandoned.

#### 2.3.1.1 DISKETTES AND CD-ROMS

Holders shall conform to the following standards:

- IBM PC/AT compatible 1.44MB 3 1/2".
- The file must be in Text format.
- A Carriage-Return and Line-Feed (CR/LF) will separate each record.
- All numeric fields right-justified, zero filled.
- The file will be the only file on the diskette or CD-ROM and will be in the root directory. (See section on multiple holder reports for reporting more than one holder on a single diskette or CD-ROM.)
- Diskettes may be compressed using PKZIP or WINZIP software.

**External Labels** - Any diskette or CD-ROM must include an external label with the following information:

- Holder Name and Number (Assigned by Florida).
- Federal Employer ID Number (FEIN).
- File Name
- Report Year

**NOTICE:** The Department has the ability to accept OpenPGP encrypted reports. For instructions on encrypting reports using OpenPGP, go to our website at [www.fltreasurehunt.org](http://www.fltreasurehunt.org). Click on the Reporting Unclaimed Property link and then in the Reporting Instructions section click on the “Click here for more information” link under the second “Notice”.

### **2.3.1.2 FILE DESCRIPTIONS**

The NAUPA standard for reporting unclaimed property is based upon six (6) record types:

1. Holder Records
2. Property Records
3. Property Additional Owners
4. Reserved
5. Securities Additional Information
6. Tangible Property Information
7. Reserved
8. Reserved
9. Summary Information

The records are based upon a 625-byte record layout developed by NAUPA. The first byte of each record contains a TR-CODE that denotes the type of record, and the subsequent 624 bytes are used to store the fields for that particular record. The TR-CODE will be a number between 1 and 9. This number will indicate the type of record as indicated below:

If TR-CODE

- = 1, then it is a HOLDER record.
- = 2, then it is a PROPERTY record.
- = 3, then it is a PROPADD record.
- = 5, then it is a SECURITY record.
- = 6, then it is a TANGIBLE record.
- = 9, then it is a SUMINFO record

TR-CODES 4, 7, and 8 are reserved for future use.

Holders using the new NAUPA standard must use the file layouts as shown in the remainder of this document. The fields are comprehensive in nature, meaning some fields are not used by all states and some fields may only be used by one state (See Section 2.3.2. starting on page 30 for field definitions and specifications).

The Department will load the fields that we will need from this format. In the Mandatory – Required – Optional column of each record type layout, it will state that it is a mandatory, required or optional (See layout Section 2.3.3. starting on page 43 of this manual.

**If the field is marked:**

- **"mandatory" or "M", information must be supplied in order to process the file correctly or the file will be rejected.**
- **“required” or "R", you must supply the information if you know it, i.e., the information is usually required by law or regulation.**
- **"optional" or "O", the information is desired and will be used if supplied.**

### 2.3.1.3 MULTIPLE HOLDER REPORTS

Since the PROPERTY, PROPADD, SECURITIES, TANGIBLE and SUMINFO do not contain fields to link them with a certain holder record, using a single file for multiple Holder Reports requires some special handling. If multiple Holder Reports are put on a single medium, Holders **MUST** follow the instructions below in Section 2.3.1.3.1.

#### 2.3.1.3.1. Diskette and CD-ROM

Multiple Holder Reports may be included on a single diskette or CD-ROM using one of the following options:

OPTION 1- Each Holder Report is located in a separate file in the root directory. The file begins with a HOLDER record, and ends with a SUMINFO record. Only one HOLDER and one SUMINFO record exists in the file.

OPTION 2 - All Holder Reports are in the same file in the root directory. The Holder Report must be the first record file, and the SUMINFO record must be the last record in that Holder Report. All PROPERTY, PROPADD, SECURITY and TANGIBLE records located between the HOLDER and SUMINFO records will be assumed to belong to that HOLDER record. The HOLDER record for the second Holder Report should be the first record after the SUMINFO record for the previous Holder Report. The same criteria will hold true for the next Holder Report.

## 2.3.2 FIELD DEFINITIONS/SPECIFICATIONS

This section provides definitions of the various fields which make up each record type. The Department requests that a holder provide as much information as possible about the property and owner. This will assist the Department in its attempt to locate the owner and in ensuring the Department pays the correct owner of the property.

**The Department requests that once the electronic file is created, the holder review the file, specifically the owner information, to ensure it is complete, accurate and formatted correctly. If there are any problems with this information, the Department will contact the holder.**

### 2.3.2.1 HOLDER RECORD – FIELD DEFINITIONS/SPECIFICATIONS

There will always be at least one HOLDER record with each report. The information in the HOLDER record relates to the institution reporting the property. All subsequent PROPERTY, PROPADD, SECURITY, TANGIBLE and the SUMINFO records are attributed to this holder's report.

#### A. TR-CODE:

This field should contain "1" to denote that the record is a HOLDER record.

#### B. HOLDER-TAXID:

Federal Employer Identification Number (FEIN) - Enter the nine-digit FEIN assigned to you by the Federal Government. If you are not familiar with your FEIN, contact your payroll, accounting or tax department. Do not include any hyphens in the FEIN.

#### C. HOLDER-TAXID-EXT:

**If any other departments or branches of your organization file unclaimed property reports using the same tax FEIN listed on your report, please contact the Unclaimed Property Reporting Section at (850) 413-5522 to receive the FEIN Suffix Number for your organization.** The suffix will be used to identify the correct reporting department/branch as recorded on the Unclaimed Property database. If your business files only one report, default to "0001".

#### D. HOLDER-RPT-YEAR:

Enter the four-digit year for which the property is being reported:

For the period ending 12/31/2007 and due April 30, 2008, the holder report year would be "2007".  
For the period ending 12/31/2008 and due April 30, 2009, the holder report year would be "2008".

#### E. HOLDER-RPT-TYPE:

Remittance Report: This field should always be populated with "R" to denote that this is a remittance report, i.e., money and/or property are being remitted at this time as required by Florida Statutes.

#### F. HOLDER-RPT-NUMBER:

If it is the first report filed by the holder for the report year, this should be "01". If the holder (under the same FEIN and extension) files multiple reports during the year, this number should increase by one for each additional report.

#### G. HOLDER-RPT-FORMAT:

This field should always contain an "R" for Revised NAUPA format. No other values are acceptable.

#### H. HOLDER-SIC-CODE:

This is a six-digit Standard Industrial Classification (SIC) code that indicates the primary business activity of the holder. A listing of the SIC codes can be found on our web page at <http://www.fltreasurehunt.org>. Click on the **Reporting Unclaimed Property** link. Under the Reporting Links and Information Section, click on the **SIC Codes** link.

#### I. HOLDER-INCORPORATED-STATE:

Enter the two-character postal abbreviation of the state in which the company is incorporated. Savings and loan associations, banks and credit unions should enter the state in which they were chartered.

#### HOLDER-INCORPORATED-DATE:

(J.) HOLDER-INC-DATE-YYYY (four-digit year)

(K.) HOLDER-INC-DATE-MM (two-digit month)

(L.) HOLDER-INC-DATE-DD (two-digit day)

Enter the date on which the company was incorporated or licensed to do business. Savings and loan associations, banks and credit unions should enter the date their organization was chartered. "MM" equals the numerical month, "DD" equals the day and "YYYY" equals the year.

#### M. HOLDER-NAME

Enter the name of the company or institution for which you are reporting. **Punctuation should never be used under any circumstances (periods, commas, apostrophes, etc.)** If the name of the company starts with the word "The," place "The" at the end. For example: "The Smith Company" should read "Smith Company The". Do not abbreviate the first word of the company name, e.g., American vs. Amer. National vs. Natl. Also, do not use numeric in the holder name field unless absolutely necessary. The word "First" should never be abbreviated as "1st." Exceptions can be made when a number is a part of a company logo or registered trademark such as A1 Inc or 84 Lumber. Company names containing initials should be with spaces between them, e.g., J J Reynolds vs. JJ Reynolds.

#### N. HOLDER-CITY

Enter the name of the city in which the corporate headquarters is located or primary place of business for the FEIN noted above.

#### O. HOLDER-COUNTY

Enter the name of the county in which the corporate headquarters is located or primary place of business for the FEIN noted above.

#### P. HOLDER-STATE

Enter the name of the state in which the corporate headquarters is located or primary place of business for the FEIN noted above. Enter the valid two-character postal abbreviation of the holder's state.

**HOLDER-CONTACT1:** Enter the name, address and phone number plus extension, if applicable, of the person responsible for the report. The person should also be able to answer questions concerning the contents of the report, i.e., the person who compiled the report. This person will be contacted by the Department concerning questions about the report.

(Q.) NAME

Enter the report contact person's name in the order of first, middle, last.

(R.) ADDR1

(S.) ADDR2

(T.) ADDR3

Enter the mailing address.

(U.) CITY

Enter the city. **Do not use commas.** If the address is outside the United States, list the province, etc. here.

(V.) STATE

Enter the two-character state abbreviation.

(W.) ZIP

Enter five or nine-character zip. If you use only the first 5 positions, space fill the remaining 4 positions, i.e., Do not use zeros to fill the remaining positions. **Do not include any hyphens in the zip code.**

(X.) COUNTRY

Enter Country three-letter abbreviation, i.e., USA.

TELEPHONE:

(Y.) TEL-AC

Enter the area code.

(Z.) TEL-NBR

Enter the seven-digit telephone number.

(AA.) TEL-EXTENSION

Enter the Extension. Space fill, if not applicable. Do NOT zero fill.

(AB.) E-MAIL

Enter the e-mail address for Contact 1.

**HOLDER-CONTACT2: Enter the name, address and phone number plus extension, if applicable, of the person responsible for claims. This person will be contacted by the Department or potential owners concerning questions about the claims, and the states will also refer owners to this person during the advertising/notification process.**

(AC.) NAME

Enter the claim contact person's name, in the order of first, middle, last.

(AD.) ADDR1

(AE.) ADDR2

(AF.) ADDR3

Enter the mailing address.

(AG.) CITY

Enter the city. **Do not use commas.** If the address is outside the United States, list the province, etc. here.

(AH.) STATE

Enter the two-character state abbreviation.

(AI.) ZIP

Enter five- or nine-character zip. If you use only the first 5 positions, space fill the remaining 4 positions, i.e., do **NOT** use zeros to fill the remaining positions. **Do not include any hyphens in the zip code.**

(AJ.) COUNTRY

Enter Country 3-letter abbreviation, i.e., USA.

TELEPHONE:

(AK.) TEL-AC

Enter the area code.

(AL.) TEL-NBR

Enter the seven-digit telephone number.

(AM.) TEL-EXTENSION

Enter the Extension. Space fill, if not applicable. **Do NOT zero fill.**

(AN.) E-MAIL

Enter the e-mail address for Contact 2.

**HOLDER-FAX:**

**(AO.) TEL-AC**

Enter the area code.

**(AP.) TEL-NBR**

Enter the seven-digit fax number.

**(AQ.) NAICS CODE**

Enter the NAICS code. A listing of acceptable values can be found at

<http://www.census.gov/epcd/www/naics.html>.

**(AR.) FILLER**

Space fill.

**2.3.2.2 PROPERTY RECORD – FIELD DEFINITION/SPECIFICATIONS**

There is one PROPERTY record for each piece of property. The PROPERTY record contains information about the piece of property and about the Primary Property Owner (if known). Each piece of property will have a separate PROPERTY record. **If an owner has multiple pieces of property, there will be a separate PROPERTY record for each piece of property.**

**A. TR-CODE:**

This field should contain "2" to denote that the record is a PROPERTY record.

**B. PROP-SEQUENCE-NUMBER:**

The sequence number for each record should be unique. The first property record for a holder should be "000001" for the PROP-SEQUENCE-NUMBER, and the sequence number should be incremented by 1 as other property records are added.

**C. PROP-OWNER-TYPE:**

Enter "P" to denote primary owner information.

**D. PROP-NAME-ID:**

If this is a company or business enter "C," to identify the name on this record as being a company or business name. Otherwise, blank fill if this is an individual's name on this record.

**E. PROP-OWNER-NAME-LAST:**

Enter the owner's last name **OR** the company name or business name.

If the owner is a business, enter the business name exactly as adopted, except where the first word is "The." In this case, "The" should be placed at the end. For example: "The Smith Company" should be entered as "Smith Company The." **Punctuation should never be used under any circumstances (periods, commas, apostrophes, etc.)** Do not abbreviate the first word of the company name, e.g., American vs. Amer, National vs. Natl. Also, do not use numeric in the name field unless absolutely necessary. The word "first" should never be abbreviated as "1st." Exceptions can be made when a number is a part of a company logo or registered trademark such as A1 Inc or 84 Lumber. Company names containing initials should be with spaces between them, e.g., J J Reynolds vs. JJ Reynolds.

**NOTE:** Section 717.117(1)(d), Florida Statutes, provides that items under \$50 may be reported in an "**AGGREGATE**" amount to simplify reporting.

List all items reportable in the aggregate first. **If the owner record is an aggregate, enter in this field "AGGREGATE."** **If the owner/owners are unknown, enter "UNKNOWN."** Aggregate totals should be broken down by property type. Aggregate property type codes XX99 (eg. AC99, MS99, etc.) **are not** acceptable property type codes. Next, list all owners with an amount of \$50 or greater.

The holder is not required to report items in the aggregate. The holder can elect to list each individual property.

**NOTE: If an owner comes forward for a small dollar claim on property reported in the aggregate, the holder will be contacted by the Department to verify if the owner was part of the aggregate property. This process can**

**be simplified by sending an attachment showing the owner detail that makes up the aggregate. This information is maintained with the filed report and is referred to if an owner comes forward for a small dollar claim.**

**F. PROP-OWNER-NAME-FIRST:**

Enter the owner's first name. **Punctuation should never be used under any circumstances (periods, commas, apostrophes, etc.)**

**G. PROP-OWNER-NAME-MIDDLE:**

Enter the owner's middle name. **Punctuation should never be used under any circumstances (periods, commas, apostrophes, etc.)**

**H. PROP-OWNER-NAME-PREFIX:**

Enter the owner's prefix such as M/M (for Mr. or Mrs.). **Punctuation should never be used under any circumstances (periods, commas, apostrophes, etc.)**

**I. PROP-OWNER-NAME-SUFFIX:**

Enter the owner's suffix such as Jr, Sr, and III. **Punctuation should never be used under any circumstances (periods, commas, apostrophes, etc.)**

**J. PROP-OWNER-NAME-TITLE:**

Enter the owner's title such as Dr, Pvt., and Rev. **Punctuation should never be used under any circumstances (periods, commas, apostrophes, etc.)**

**PROP-OWNER:**

(K.) ADDRESS1

(L.) ADDRESS2

(M.) ADDRESS3

Enter the owner's last-known address. You must list the last-known address even if the mail has been returned by the post office. When establishing whether the claimant is the rightful owner, confirmation of this address is very important. **If the owner's street address is unknown, fill with "unknown" or "address unknown."**

**N. PROP-OWNER-CITY:**

Enter the city of the last-known address of the owner. If the city is not in the United States, list the city and province in this field. **If the owner's city is unknown, space fill. DO NOT fill with "unknown" or "city unknown."**

**O. PROP-OWNER-COUNTY:**

Enter the county name of the owner's last-known address, or the holder's branch location or principal place of business in the reporting state. **If the county name is unknown, space fill.**

**P. PROP-OWNER-STATE:**

Enter the standard two-character postal abbreviation of the owner's state of last-known address. **If the owner's last known address is not in the United States, space fill.**

**Q. PROP-OWNER-ZIP:**

Enter the owner's five- or nine-character zip code. If 5 digits are used, space fill the remaining 4 digits.

**R. PROP-OWNER-COUNTRY:**

Enter the country of the last-known address of the owner.

**S. PROP-OWNER-TAXID:**

Enter the owner's social security number (SSN) or the company's FEIN. When establishing ownership, the SSN/FEIN is very important.

**T. PROP-OWNER-TAXID-EXT:**

Enter the owner's SSN or FEIN extension, if applicable.

**PROP-OWNER-DATE-OF-BIRTH:**

- (U.) PROP-OWNER-DOB-YYYY (four-digit year)
- (V.) PROP-OWNER-DOB-MM (two-digit month)
- (W.) PROP-OWNER-DOB-DD (two-digit day)

Enter the owner's date of birth. "MM" equals the numerical month, "DD" equals the day and "YYYY" equals the year.

**PROP-STARTING-TRANSACTION-DATE:**

- (X.) PROP-ST-TRANS-DATE-YYYY (four-digit day)
- (Y.) PROP-ST-TRANS-DATE-MM (two-digit month)
- (Z.) PROP-ST-TRANS-DATE-DD (two-digit day)

**This field is optional.** The PROP-STARTING-TRANSACTION-DATE (also known as the date of last transaction, or last activity date) is the date on which the last deposit or withdrawal occurred, the date the mail was returned or the date on which the property became payable, redeemable, dormant, or returnable (e.g., issue date of a check).

"MM" equals the numerical month, "DD" equals the day and "YYYY" equals the year.

If your records reflect a month and year only, enter the available information and use "01"s for the unknown day (e.g., 20000601 or 20000101). If your records reflect a year only, enter the available information and use "12" for the unknown month and "31" for the unknown day (e.g., 20001231).

If you are reporting property with periodic payments such as dividends, oil and gas royalties or commission checks, enter the beginning and ending dates on which the amounts were payable. Total all amounts due the owner during the applicable time period and list the payments as one account on the owner record. If the owner was to receive periodic payments enter the beginning date of the first payment.

**PROP-ENDING-TRANSACTION-DATE: (This is a required field)**

- (AA.) PROP-EN-TRANS-DATE-YY (four digits)
- (AB.) PROP-EN-TRANS-DATE-MM (two digits)
- (AC.) PROP-EN-TRANS-DATE-DD (two digits)

Enter in this field the "date of last transaction". This is the date on which the last deposit/withdrawal occurred, the date the mail was returned or the date on which the property becomes payable, redeemable or returnable (e.g., issue date of a check) or the date of the last periodic payment.

**AD. PROP-PROPERTY-TYPE:**

The property type code distinguishes one property type from another. All codes are four characters. Valid property type codes can be found in Appendix D on pages 49-51 of this manual.

**AE. PROP-AMOUNT-REPORTED:**

Enter the amount due the owner before any deductions, such as taxes, were subtracted. The amount reported is a 10-digit, zero fill field with two decimal places assumed. The decimal point is not actually entered.

Example: \$253 = 0000025300

\$253.73 = 0000025373

**AF. PROP-DEDUCTION-TYPE: (Not Applicable to State of Florida)**

**AG. PROP-DEDUCTION-AMOUNT: (Not Applicable to State of Florida)**

**AH. PROP-AMOUNT-ADVERTISED: (Not Applicable to State of Florida)**

**AI. PROP-ADDITION-TYPE: (Not Applicable to State of Florida)**

**AJ. PROP-ADDITION-AMOUNT: (Not Applicable to State of Florida)**

**AK. PROP-DELETION-TYPE: (Not Applicable to State of Florida)**

**AL. PROP-DELETION-AMOUNT: (Not Applicable to State of Florida)**

**AM. PROP-AMOUNT-REMITTED:**

Enter the amount due each owner. The amount entered is the amount to be paid to the state. (**DO NOT** enter a negative amount. Owners with negative amounts should not be reported.)

Example: \$253 = 0000025300

\$253.73 = 0000025373

**AN. PROP-INTEREST-FLAG:**

If the property is interest bearing, the PROP-INTEREST-FLAG should be "Y." Otherwise, the FLAG will indicate "N."

**AO. PROP-INTEREST-RATE:**

If the PROP-INTEREST-FLAG indicator is set to "Y," this field should be populated with the current interest rate being earned on this account. The interest rate is a seven digit, zero filled field, with four decimal places assumed. The decimal is not actually entered.

EXAMPLE: 5.00% would be entered as 0050000.

10.25% would be entered as 0102500.

2.375% would be entered as 0023750.

**AP. PROP-SECURITY-ISSUE-NAME: (Mandatory if reporting securities)**

Enter the name of the security issue, which is due the owner. DO NOT enter more than one issue per owner record. (For example, brokers must provide one property record for each issue held in an owner's account.) If this is a redemption, this field should contain the name of successor. Make sure to indicate the type of stock if it is other than common.

**If the issue name is longer than the allowed field, please use the SECURITIES record type (See Section 2.3.2.4. starting on page 41) to include the entire security name.**

**NOTE:** When reporting stock where the owner has different issues and these issues will be due the owner, there should be a property record for each issue that will be due that owner. For example: Paul Smith had an account with XYZ broker. In the account, Mr. Smith owned 12 shares of ABC Office Supply Common, 4 shares of ABC Office Supply \$2.75 Preferred, and 20 shares of Afterschool Snack Company Common. There should be three property records for Mr. Smith.

**AQ. PROP-SECURITY-CUSIP: (Mandatory if reporting securities)**

Enter the CUSIP number of the security issue named in number "AG" above which is due the owner, i.e., this is what you will be remitting to the state (This must equal to what is remitted to the state).

**AR. PROP-NUMBER-OF-SHARES:**

Enter the number of shares which is due the owner, i.e., this is the total number of shares due the owner for this issue. The number of shares is a 12-digit field with four decimal places assumed. The decimal point is not actually entered.

Field AR will always equal to Field AU.

Example: 543 = 000005430000

543.73 = 000005437300

1,543.7334 = 000015437334

**AS. PROP-ADD-SHARES: (Not Applicable to State of Florida)**

**AT. PROP-DEL-SHARES: (Not Applicable to State of Florida)**

**AU. PROP-REM-SHARES:**

Enter the number of shares, which is being remitted for the owner, i.e., and the total number of shares remitted for the owner for this issue. The number of shares is a 12-digit field with four decimal places assumed. The decimal point is not actually entered.

Example: 543 = 000005430000

543.73 = 000005437300

1,543.7334 = 000015437334

## **IMPORTANT INFORMATION ON THE REMITTANCE OF SECURITIES.**

**Common or Preferred Stock and Mutual Funds eligible for DTC/DWAC transfer** shall be sent directly to: Smith Barney, Inc.; DTC #0418; c/o Florida Department of Financial Services; Acct. # 448-90002-18 005 (If assistance is needed for DTC/DWAC transfers, please contact Beverly Avera at Smith Barney 229/244-0310). A list of the securities transferred must be faxed to the BUP at 850/413-3017 (Attn: Unclaimed Property Asset Management/Securities Processing) on the day the transfer is requested. **Please include the holder number on the fax.** The Department's FEIN is 59-6001874. Indicate in the fax that the shares have been transferred via DTC to the department's account. **A copy of the fax should accompany the unclaimed property report sent to the Department.**

**Dividend reinvestment plans should be terminated** by converting the whole shares to common stock and liquidating the partial shares. The whole shares can then be sent via DTC to: Smith Barney, Inc.; DTC #0418; c/o Florida Department of Financial Services; Acct. # 448-90002-18 005. The proceeds for partial shares can be mailed to the Florida Department of Financial Services, Attn: Bureau of Unclaimed Property, 200 East Gaines St, Tallahassee, FL 32399

**Direct Registration/Book-Entry shares are no longer accepted by the Department.** These issues of common stock should be transferred via DTC to: Smith Barney, Inc.; DTC #0418; c/o Florida Department of Financial Services; Acct. # 448-90002-18 005. If the securities cannot be sent via DTC, physical certificates should be issued to the Department and mailed to the Florida Department of Financial Services, Attn: Bureau of Unclaimed Property, 200 East Gaines St, Tallahassee, FL 32399

**Securities remitted by certificate** should be registered in the name of "Florida Department of Financial Services" (FLDFS) and mailed to the Florida Department of Financial Services, Attn: Bureau of Unclaimed Property, 200 East Gaines St, Tallahassee, FL 32399.

**To transfer securities not eligible for DTC** by establishing an account in the name of Florida Department of Financial Services (This option should only be used as a last resort):

- 2) Establish an account in the name of Florida Department of Financial Services (Prior approval from the Department is not necessary)
  
- 2) Mail the statement to the Florida Department of Financial Services, Attn: Bureau of Unclaimed Property, 200 East Gaines St, Tallahassee, FL 32399. The statement must include:
  - a) issue name
  - b) contact information for issuer
  - c) account number
  - d) name and address for whom issues are registered
  - e) transaction information

**NOTE: If the Department does not receive an account statement with the report, it will necessitate additional correspondence from the Department, which may be time consuming for both parties. PLEASE DO NOT SEND SCREEN PRINTS AS A SUBSTITUTE FOR AN ACCOUNT STATEMENT.**

### **AV. PROP-UNEXCHANGED-ISSUE-NAME:**

Enter the name of the security issue, which is still in the possession of the owner.

### **AW. PROP-UNEXCHANGED-CUSIP:**

Enter the CUSIP number of the security issue, which is still in the possession of the owner.

### **AX. PROP-UNEXCHANGED-SHARES:**

Enter the number of shares, which are still in the possession of the owner. The number of shares is a 12-digit field with four decimal places assumed. The decimal point is not actually entered.

Example: 543 = 000005430000

543.73 = 000005437300

1,543.7334 = 000015437334

#### AY. PROP-ACCT-NUMBER

- (1) Always enter the insurance policy or account number in this field.
- (2) Substitute the owner number if reporting mineral proceeds.
- (3) Substitute the box number if reporting safe deposit box contents.
- (4) Substitute the GF number if an escrow account.

#### AZ. PROP-CHECK-NUMBER

Provide the check number if reporting cashier's checks or any other outstanding checks.

#### BA. PROP-DESCRIPTION

Any additional information that will assist in identifying the owner of the property should be listed in the property description field. Information (such as the purchaser of a cashier's check, lease name of a mineral interest, or beneficiary to an insurance policy) should be listed in the property description. If you are reporting insurance-related property, please specify "L" for life insurance, "PC" for property and casualty insurance, or "AH" for accident and health insurance.

**If you are reporting an aggregate amount, list the number of properties which were combined for the aggregate entry, e.g., 15-AC01, 10-AC02, 45-CK01.**

#### BB. PROP-RELATIONSHIP-CODE

This field must be populated. The PROP-RELATIONSHIP-CODE indicates who must claim the property. Refer to Appendix A on page 48 of this manual for valid relationship codes.

#### BC. PROP-OWNER-TYPE-CODE

This field must be populated. The PROP-OWNER-TYPE-CODE indicates the type of owner. Refer to Appendix B on page 48 of this manual for valid owner codes.

#### BD. FILLER

Space fill.

### *2.3.2.3 PROPADD RECORD – FIELD DESCRIPTION/SPECIFICATION*

**SPECIAL NOTE to holders reporting unclaimed property hold or owing under any life or endowment insurance policy or annuity contract:** Section 717.117(1)(b), Florida Statutes, provides that "For unclaimed funds which have a value of \$50 or more held or owing under any life or endowment insurance policy or annuity contract, the full name, FEIN or social security number, date of birth, if known, and last known address of the insured or annuitant and of the beneficiary according to records of the insurance company holding or owing the funds" and must be included in the report submitted to the Department. This information is in addition to the owner information provided by the holder on the DFS-UP-121 form or the electronic file.

If you are reporting in electronic format, the information should be reported as shown below. See Section 2.3 for detailed instructions for reporting in the electronic format.

**TR-CODE 2** will include the owner of the unclaimed property as determined by the insurance company.

**TR-CODE 3** will include the additional information as required by Section 717.117(1)(b), F.S. For these property types there **will always** be two TR-CODE 3 records (one for insured information and one for beneficiary information)

- a. Insured – the TR-CODE 3 record will list the insured's full name, taxpayer identification number, date of birth, if known, and last known address **and USE the relationship code IN.**
- b. Beneficiary – the TR-CODE 3 record will list the beneficiaries' full name, taxpayer identification number, date of birth, if known, and last known address **and USE the relationship code BE.**

The PROPADD record contains information about additional owners of property recorded in the PROPERTY record. **If there is more than one owner of a piece of property, each additional owner for the property will have a PROPADD record.**

**PROPADD records must be contained within the same HOLDER/SUMMINFO record set.**

**NOTE: If there are no additional owners for an account, a PROPADD record will be added with "NONE" in the "PROP-OWNER-NAME-LAST" field indicating there are no additional owners on this record besides the primary owner.** A file will always have four records at the minimum consisting of a HOLDER, PROPERTY, PROPADD, and a SUMINFO record.

**JOINT ACCOUNTS/ALTERNATE OWNERS**

**Accounts having more than one name must be reported as separate records on the diskette or CD-ROM.** The first record must be the original cash, stock, or safe deposit box record (TR-CODE 2). One or more alternate owner records (TR-CODE 3) should follow this record. Diskettes or CD-ROMS submitted with joint accounts reported as a single record will be immediately returned to the holder for corrections.

**A. TR-CODE:**

This field should contain "3" to denote that the record is a PROPADD record.

**B. PADD-SEQUENCE-NUMBER:**

This field will contain the same PROP-SEQUENCE-NUMBER from the primary PROPERTY record.

**C. PADD-OWNER-TYPE:**

This field should contain "A" to denote additional owner information.

**D. PADD-OWNER-NAME-LAST:**

**Enter the additional owner's last name or the company name if it is a business.** If the additional owner is a business, enter the business name exactly as adopted, except where the first word is "The." In this case, "The" should be placed at the end. For example: "The Smith Company," should be entered as "Smith Company The." **Punctuation should never be used under any circumstance (periods, commas, apostrophes, etc.).** Do not abbreviate the first word of the company name, e.g., American vs. Amer, National vs. Natl. Also, do not use numeric in the name field unless absolutely necessary. The word "first" should never be abbreviated as "1st." Exceptions can be made when a number is a part of a company logo or registered trademark such as A1 Inc or 84 Lumber. Company names containing initials should be with spaces between them, e.g., J J Reynolds vs. JJ Reynolds.

**E. PADD-OWNER-NAME-FIRST:**

Enter the owner's first name. **Punctuation should never be used under any circumstance (periods, commas, apostrophes, etc.).**

**F. PADD-OWNER-NAME-MIDDLE:**

Enter the owner's middle name. **Punctuation should never be used under any circumstance (periods, commas, apostrophes, etc.).**

**G. PADD-OWNER-NAME-PREFIX:**

Enter the owner's prefix. **Punctuation should never be used under any circumstance (periods, commas, apostrophes, etc.).**

**H. PADD-OWNER-NAME-SUFFIX:**

Enter the owner's suffix such as Jr, Sr, and III. **Punctuation should never be used under any circumstance (periods, commas, apostrophes, etc.).**

**I. PADD-OWNER-NAME-TITLE:**

Enter the owner's title such as Dr, Pvt., and Rev. **Punctuation should never be used under any circumstance (periods, commas, apostrophes, etc.).**

**PADD-OWNER:**

(J.) ADDRESS1:

(K.) ADDRESS2:

(L.) ADDRESS3:

Enter the owner's last-known address. You must list the last-known address even if the mail has been returned by the post office. When establishing whether the claimant is the rightful owner, confirmation of this address is very important.

**M. PADD-OWNER-CITY:**

Enter the city of the last-known address of the owner. If the city is not in the United States, list the city and province in this field. If the owner's city is unknown, space fill. DO NOT fill with "unknown" or "city unknown."

**N. PADD-OWNER-COUNTY:**

Enter the county name of the owner's last-known address, or the holder's branch location or principal place of business in the reporting state. If the county name is unknown, space fill.

**O. PADD-OWNER-STATE:**

Enter the standard two-character postal abbreviation of the owner's state of last-known address. If the owner's last-known address is not in the United States, space fill.

**P. PADD-OWNER-ZIP:**

Enter the owner's five- or nine-digit zip code.

**Q. PADD-OWNER-COUNTRY:**

Enter the country of the last-known address of the owner.

**R. PADD-OWNER-TAXID:**

Enter the owner's social security number (SSN) or the company's FEIN. When establishing ownership, the SSN/FEIN is very important. Do not include any hyphens.

**S. PADD-OWNER-TAXID-EXT:**

Enter the owner's SSN or FEIN extension, if applicable. Do not include any hyphens.

**PADD-OWNER-DATE- OF-BIRTH:**

(T) PADD-OWNER-DOB-YYYY (four-digit year)

(U) PADD-OWNER-DOB-MM (two-digit month)

(V) PADD-OWNER-DOB-DD (two-digit day)

Enter the owner's date of birth. "MM" equals the numerical month, "DD" equals the day and "YYYY" equals the year.

**W. PADD-RELATIONSHIP-CODE:**

This field must be populated. The PADD-RELATIONSHIP-CODE indicates who must claim the property. Refer to Appendix A on page 48 of this manual for the valid relationship codes. A valid relationship code should be provided.

**X. PADD-SEQ-NUMBER:**

Incremented by one for each additional owner of the property denoted by the PADD-SEQUENCE-NUMBER.

Example, a piece of property has two owners in addition to the primary owner. The record for the first additional owner has a PADD-SEQ-NUMBER of "001." The record for the second additional owner has a PADD-SEQ-NUMBER of "002."

**Y. PADD-OWNER-TYPE-CODE**

This field must be populated. The PADD-OWNER-TYPE-CODE indicates the type of owner. Refer to Appendix B on page 48 of this manual for valid owner codes.

**Z. PADD-NAME-ID**

Enter "C" to identify the name on this record as being a business name. Otherwise, fill in blanks if this is an individual's name on this record.

**AA. FILLER**

Space fill.

#### **2.3.2.4 SECURITIES RECORD – FIELD DESCRIPTION/SPECIFICATION**

If other securities related information exists, there will be one SECURITIES record included after each PROPERTY record.

##### **A. TR-CODE**

This field must contain “5” to denote that the record is a SECURITIES record.

##### **B. PROP-SEQUENCE-NUMBER**

This field will contain the same PROP-SEQUENCE-NUMBER from the primary PROPERTY record.

##### **C. SECR-SUBISSUE-NAME**

Enter the Security Sub-Issue Name, if applicable.

##### **D. SECR-ORIGINAL-SHRS-HELD**

This field contains the original shares held by the owner at the time of last activity on the account. This number is used to help determine the proof required for the claimant.

##### **E. SECR-ORIGINAL-REG-NAME**

This field records the owner name EXACTLY as shown on the certificate or registration.

##### **F. SECR-DELIVERY-METHOD**

This field contains the method used to deliver securities to the State. Valid values are DTC, Physical and Account.

##### **G. SECR-CERTIFICATE**

This field contains the original certificate number of underlying, unexchanged or RPO’d shares.

##### **H. SECR-SYMBOL**

Enter the Symbol if the security is traded on a stock exchange.

##### **I. SECR-DEPOSIT-ACCOUNT**

Enter the Account Number the Security is deposited to, if applicable.

##### **J. SECR-MUTL-FAMILY**

If the Security is a Mutual Fund, enter the Fund Family Name.

##### **K. FILLER**

Space fill.

#### **2.3.2.5 TANGIBLE RECORD – FIELD DESCRIPTION/SPECIFICATION**

If tangible property information exists, there will be one or more TANGIBLE records included after each PROPERTY record.

##### **A. TR-CODE**

This field must contain “6” to denote that the record is a TANGIBLE type property record.

##### **B. PROP-SEQUENCE-NUMBER**

This field will contain the same PROP-SEQUENCE-NUMBER from the primary PROPERTY record.

##### **C. TANG-SEQUENCE-NUMBER**

This field should be incremented by 1 for each additional piece of tangible property denoted by the TANG-SEQUENCE-NUMBER. For example, an individual property has two pieces of tangible property. The record for the first piece of tangible property has a TANG-SEQUENCE-NUMBER of “001”. The record for the second piece of tangible property has a TANG-SEQUENCE-NUMBER of “002”.

##### **D. TANG-BOX-NUMBER**

The Box Number of the Safe Deposit Box, collateral receipt number if loan collateral, or other identifying number for any other type of tangible property.

E. TANG-DESCRIPTION

The description of the tangible property identified by each TANG-SEQUENCE-NUMBER.

F. TANG-UNPAID-RENT

The amount of unpaid rent or storage fees due by the owner at the time the box was opened.

G. TANG-DRILLING-FEES

Charges incurred to drill or open a Safe Deposit Box, unpaid loan balance if loan collateral.

TANG-OPENED-DATE - The date the Safe Deposit Box was opened.

(H.) TANG-OPENED-DATE-YYYY (four digit year)

(I.) TANG-OPENED-DATE-MM (two digit month)

(J.) TANG-OPENED-DATE –DD (two digit day).

K. TANG-OPENED-BY

Enter the person who opened the Safe Deposit Box.

TANG-EXPIRED-DATE - Enter the date the Safe Deposit Box lease expired.

(L.) TANG-EXPIRED-DATE-YYYY (four digit year)

(M.) TANG-EXPIRED-DATE-MM (two digit month)

(N.) TANG-EXPIRED-DATE –DD (two digit day).

O. TANG-CATEGORY-TYPE-CODE

If this is used to report tangible property, see Appendix C on page 48 of this manual for valid tangible property type codes.

P. FILLER

Space fill.

**2.3.2.6 SUMINFO RECORD – FIELD DESCRIPTION/SPECIFICATION**

There will be one SUMINFO record for each holder report. It will contain summary information that will be used for balancing purposes and to verify completeness of records reported.

A. TR-CODE:

This field should contain "9" to denote that the record is a SUMINFO record.

B. SUMM-NBR-OF-RECORDS:

This field should contain the total of number records reported including the HOLDER, PROPERTY, PROPADD and SUMINFO records. The number of records is a 6-digit field. The quantity recorded is always a whole number, i.e., no decimal positions. The minimum amount of records that can be counted is two. Those records being the HOLDER and SUMINFO which is considered a negative (none) report, i.e., no owners reported.

C. SUMM-NBR-OF-PROPERTIES:

This field should contain the total of all PROPERTY records. The number of property records is a 6-digit field. The quantity recorded is always a whole number, i.e., no decimal positions.

D. SUMM-AMOUNT-REPORTED:

This field should be the sum of the amount in the PROP-AMOUNT-REPORTED field on each PROPERTY record. The amount reported is a 12-digit field with two decimal places assumed. The decimal point is not actually entered. Example: \$1,150,125.26 = 000115012526

E. SUMM-DEDUCTION-AMOUNT: **(Not Applicable to State of Florida)**

F. SUMM-AMOUNT-ADVERTISED: **(Not Applicable to State of Florida)**

**G. SUMM-ADDITION-AMOUNT: (Not Applicable to State of Florida)**

**H. SUMM-DELETION-AMOUNT: (Not Applicable to State of Florida)**

**I. SUMM-AMOUNT-REMITTED:**

This field should be the sum of the amount in the PROP-AMOUNT-REMITTED field on each PROPERTY record. The amount remitted is a 12-digit field with two decimal places assumed. The decimal point is not actually entered. Example: \$1,150,125.26 = 000115012526

**J. SUMM-NBR-OF-SHARES:**

This field should be the sum of the amount in the PROP-NUMBER-OF-SHARES field on each PROPERTY record. The number of shares is a 14-digit field with four decimal places assumed. The decimal point is not actually entered. Example: 124256.5984 = 00001242565984

**K. SUMM-SHARES-ADD: (Not Applicable to State of Florida)**

**L. SUMM-SHARES-DEL: (Not Applicable to State of Florida)**

**M. SUMM-SHARES-REMITTED:**

This field should be the sum of the amount in the PROP-REM-SHARES field on each PROPERTY record. The number of shares is a 14-digit field with four decimal places assumed. The decimal point is not actually entered. Example: 124256.5984 = 00001242565984

**N. SUMM-NEGATIVE-REPORT**

If the report is a Negative report (no cash or shares to report for the reporting period), this field should contain "Y". If this field contains "Y", only the HOLDER (type 1) and the SUMINFO (type 9) records should be included.

**O. SUMM-SOFTWARE-VERSION**

Enter the version number of the software that created the NAUPA file.

**P. SUMM-CREATOR**

Enter the company that wrote the software that created the file.

**Q. SUMM-CREATOR-CONTACT**

Enter the name and contact information for the file creator.

**R. FILLER**

Space fill.

### **2.3.3 RECORD LAYOUT INFORMATION TABLES**

The following information relates to the record layouts on pages 30 to 43 of this manual.

Field # - Refers to the instructions.

Field Name – Refers to the name in the instructions.

Length – Field length of the record.

From – Refers to the starting position of the record.

Thru – Refers to the ending position of the record.

Required – If the field is marked "M" for mandatory, the information must be supplied in order to process your diskette/CD-ROM. If not supplied, the disk/CD-ROM will be returned to you and not processed. If the field is marked "R" for required, the information must be supplied if you know it. Law or regulation usually requires this information. If the field is marked "O" for optional, the information is desired and will be used if you supplied it.

### 2.3.3.1 RECORD LAYOUT: HOLDER

Field #	Field Name	Length	From	Thru	Required	Comment
A	Tr-Code	1	1	1	M	Must equal "1"
B	Holder-TaxID	9	2	10	M	
C	Holder-TaxID-Ext	4	11	14	R	
D	Holder-Rpt-Year	4	15	18	M	
E	Hldr-Rpt-Type	1	19	19	M	Must equal "R"
F	Hldr-Rpt-Number	2	20	21	R	
G	Hldr-Rpt-Format	1	22	22	M	Must equal "R"
H	Hldr-SIC-Code	4	23	26	M	
I	Hldr-Inc-State	2	27	28	M	
J	Hldr-Inc-Date-YYYY	4	29	32	O	
K	Hldr-Inc-Date-MM	2	33	34	O	
L	Hldr-Inc-Date-DD	2	35	36	O	
M	Holder-Name	40	37	76	M	
N	Hldr-City	30	77	106	O	
O	Hldr-County	20	107	126	O	
P	Hldr-State	2	127	128	O	
Q	Hldr-Contact1-Name	40	129	168	M	
R	Hldr-Contact1-Addr1	30	169	198	M	
S	Hldr-Contact1-Addr2	30	199	228	M	
T	Hldr-Contact1-Addr3	30	229	258	M	
U	Hldr-Contact1-City	30	259	288	M	
V	Hldr-Contact1-State	2	289	290	M	
W	Hldr-Contact1-Zip	9	291	299	M	
X	Hldr-Contact1-Country	3	300	302	M	
Y	Hldr-Contact1-Tel-AC	3	303	305	M	
Z	Hldr-Contact1-Tel-Nbr	7	306	312	M	
AA	Hldr-Contact1-Tel-Ext	4	313	316	R	
AB	Hldr-Contact1-Email	50	317	366	M	
AC	Hldr-Contact2-Name	40	367	406	O	
AD	Hldr-Contact2-Addr1	30	407	436	O	
AE	Hldr-Contact2-Addr2	30	437	466	O	
AF	Hldr-Contact2-Addr3	30	467	496	O	
AG	Hldr-Contact2-City	30	497	526	O	
AH	Hldr-Contact2-State	2	527	528	O	
AI	Hldr-Contact2-Zip	9	529	537	O	
AJ	Hldr-Contact2-Country	3	538	540	O	
AK	Hldr-Contact2-Tel-AC	3	541	543	O	
AL	Hldr-Contact2-Tel-Nbr	7	544	550	O	
AM	Hldr-Contact2-Tel-Ext	4	551	554	O	
AN	Hldr-Contact2-Email	50	555	604	O	
AO	Hldr-Fax-AC	3	605	607	O	
AP	Hldr-Fax-Number	7	608	614	O	
AQ	Hldr-NAICS-Code	6	615	620	R	
AR	Filler	5	621	625	R	Space Fill

### 2.3.3.2 RECORD LAYOUT: PROPERTY

Field #	Field Name	Length	From	Thru	Required	Comment
A	Tr-Code	1	1	1	M	Must equal "2"
B	Prop-Seq-Number	6	2	7	M	
C	Prop-Owner-Type	1	8	8	M	Must equal "P"
D	Prop-Name-ID	1	9	9	M	Must equal "C" if a company or Blank if an individual
E	Prop-Owner-Name-Last	40	10	49	M	
F	Prop-Owner-Name-First	30	50	79	R	
G	Prop-Owner-Name-Middle	10	80	89	R	

H	Prop-Owner-Name-Prefix	10	90	99	R	
I	Prop-Owner-Name-Suffix	10	100	109	R	
J	Prop-Owner-Name-Title	6	110	115	R	
K	Prop-Owner-Address1	30	116	145	R	
L	Prop-Owner-Address2	30	146	175	R	
M	Prop-Owner-Address3	30	176	205	R	
N	Prop-Owner-City	30	206	235	R	
O	Prop-Owner-County	20	236	255	O	
P	Prop-Owner-State	2	256	257	R	
Q	Prop-Owner-Zip	9	258	266	R	
R	Prop-Owner-Country	3	267	269	R	
S	Prop-Owner-TaxId	9	270	278	R	
T	Prop-Owner-TaxID-Ext	2	279	280	O	
U	Prop-Owner-DOB-YYYY	4	281	284	R	
V	Prop-Owner-DOB-MM	2	285	286	R	
W	Prop-Owner-DOB-DD	2	287	288	R	
X	Prop-ST-Trans-Date-YYYY	4	289	292	O	
Y	Prop-ST-Trans-Date-MM	2	293	294	O	
Z	Prop-ST-Trans-Date-DD	2	295	296	O	
AA	Prop-EN-Trans-Date-YYYY	4	297	300	M	
AB	Prop-EN-Trans-Date-MM	2	301	302	M	
AC	Prop-EN-Trans-Date-DD	2	303	304	M	
AD	Prop-Property Type	4	305	308	M	
AE	Prop-Amount Reported	10	309	318	M	
AF	Prop-Deduct Type	2	319	320	O	
AG	Prop-Deduct Amount	10	321	330	O	Not Applicable to Florida
AH	Prop- Amount Advertised	10	331	340	O	Not Applicable to Florida
AI	Prop-Addition Type	2	341	342	O	Not Applicable to Florida
AJ	Prop-Addition Amount	10	343	352	O	Not Applicable to Florida
AK	Prop-Deletion Type	2	353	354	O	Not Applicable to Florida
AL	Prop-Deletion Amount	10	355	364	O	Not Applicable to Florida
AM	Prop-Amount Remitted	10	365	374	M	
AN	Prop-Interest Flag	1	375	375	O	
AO	Prop-Interest Rate	7	376	382	O	
AP	Prop-Security Issue Name	25	383	407	M	If reporting securities
AQ	Prop-Security CUSIP	9	408	416	M	If reporting securities
AR	Prop-Reported Shares	12	417	428	M	
AS	Prop-Add Shares	12	429	440	O	Not Applicable to Florida
AT	Prop-Del Shares	12	441	452	O	Not Applicable to Florida
AU	Prop-Remitted Shares	12	453	464	M	If reporting securities
AV	Prop-Unexchanged Issue Name	25	465	489	R	
AW	Prop-Unexchanged CUSIP	9	490	498	R	
AX	Prop-Unexchanged Shares	12	499	510	R	
AY	Prop-Account Number	20	511	530	M	
AZ	Prop-Check-Number	20	531	550	M	
BA	Prop-Description	50	551	600	R	
BB	Prop-Relationship-Code	2	601	602	O	
BC	Prop-Owner-Type-Code	2	603	604	O	
BD	Filler	21	605	625	O	

### 2.3.3.3 RECORD LAYOUT: PROPADD

Field #	Field Name	Length	From	Thru	Required	Comment
A	Tr-Code	1	1	1	M	Must equal "3"
B	Padd-Seq-Number	6	2	7	M	
C	Padd-Owner-Type	1	8	8	M	Must equal "A"
D	Padd-Owner-Name-Last	40	9	48	M	
E	Padd-Owner-Name-First	30	49	78	R	
F	Padd-Owner-Name-Middle	10	79	88	R	

G	Padd-Owner-Name-Prefix	10	89	98	R	
H	Padd-Owner-Name-Suffix	10	99	108	R	
I	Padd-Owner-Name-Title	6	109	114	R	
J	Padd-Owner-Address1	30	115	144	R	
K	Padd-Owner-Address2	30	145	174	R	
L	Padd-Owner-Address3	30	175	204	R	
M	Padd-Owner-City	30	205	234	R	
N	Padd-Owner-County	20	235	254	O	
O	Padd-Owner-State	2	255	256	R	
P	Padd-Owner-Zip	9	257	265	R	
Q	Padd-Owner-Country	3	266	268	R	
R	Padd-Owner-TaxId	9	269	277	R	
S	Padd-Owner-TaxID-Ext	2	278	279	O	
T	Padd-Owner-DOB-YYYY	4	280	283	R	
U	Padd-Owner-DOB-MM	2	284	285	R	
V	Padd-Owner-DOB-DD	2	286	287	R	
W	Padd-Relationship Code	2	288	289	M	
X	Padd-Seq Number	3	290	292	M	
Y	Padd-Owner-Type-Code	2	293	294	O	
Z	Padd-Name-ID	1	295	295	O	
AA	Filler	330	296	625	M	Space Fill

#### 2.3.3.4 RECORD LAYOUT: SECURITIES INFO.

Field #	Field Name	Length	From	Thru	Required	Comment
A	TR-Code	1	1	1	M	Must equal "5"
B	Prop-Sequence-Number	6	2	7	M	
C	Secr-Subissue-Name	150	8	157	O	
D	Secr-Original-Shrs-Held	12	158	169	O	
E	Secr-Original-Reg-Name	70	170	239	O	Exact Registration Name
F	Secr-Delivery-Method	10	240	249	M	
G	Secr-Certificate	20	250	269	M	Original Certificate Number
H	Secr-Symbol	10	270	279	O	
I	Secr-Deposit-Account	20	280	299	O	
J	Secr-Mutl-Family	50	300	349	R	
K	Filler	276	350	625	M	Space fill

#### 2.3.3.5 RECORD LAYOUT: TANGIBLE

Field #	Field Name	Length	From	Thru	Required	Comment
A	TR-Code	1	1	1	M	Must equal "6"
B	Prop-Sequence-Number	6	2	7	M	
C	Tang-Sequence-Number	3	8	10	M	
D	Tang-Box-Number	25	11	35	M	
E	Tang-Description	125	36	160	M	
F	Tang-Unpaid-Rent	12	161	172	O	
G	Tang-Drilling-Fees	12	173	184	R	
H	Tang-Opened-Date-YYYY	4	185	188	M	
I	Tang-Opened-Date-MM	2	189	190	M	
J	Tang-Opened-Date-DD	2	191	192	M	
K	Tang-Opened-By	25	193	217	O	
L	Tang-Expired-Date-YYYY	4	218	221	O	
M	Tang-Expired-Date-MM	2	222	223	O	
N	Tang-Expired-Date-DD	2	224	225	O	
O	Tang-Category-Type-Code	4	226	229	R	
P	Filler	396	230	625	M	Space fill

**2.3.3.6 RECORD LAYOUT: SUMMARY RECORD**

Field #	Field Name	Length	From	Thru	Required	Comment
A	Tr-Code	1	1	1	M	Must equal "9"
B	Summ-Nbr of Records	6	2	7	M	
C	Summ-Nbr of Properties	6	8	13	M	
D	Summ-Amount Reported	12	14	25	M	
E	Summ-Deduct Amount	12	26	37	O	
F	Summ-Amount Advertised	12	38	49	O	
G	Summ-Addition Amount	12	50	61	O	
H	Summ-Deletion Amount	12	62	73	O	
I	Summ-Amount Remitted	12	74	85	M	
J	Summ-Nbr of Shares	14	86	99	M	
K	Summ-Add Shares	14	100	113	O	
L	Summ-Del Shares	14	114	127	O	
M	Summ- Shares Remitted	14	128	141	M	
N	Summ-Negative-Report	1	142	142	O	
O	Summ-Software-Version	20	143	162	M	
P	Summ-Creator	20	163	182	M	
Q	Summ-Creator-Contact	70	183	252	M	
R	Filler	373	253	625	M	Space Fill

The following appendices relate to both Department forms and electronic reports.

### **3. APPENDIX A - RELATIONSHIP CODES TABLE (FORMS & ELECTRONIC)**

For Field "W" on the PROPADD Record and Field "BB" on the PROPERTY Record (Electronic)	
AN - And account	OR - Or accounts
CF - Custodian	UG - Uniform Gift to Minor
AD - Administrator	IT - In Trust For
BE - Beneficiary	FB - For the Benefit of
JT - Joint Tenant with Rights of Survivorship	GD - Guardian For
TE - Trustee	EX - Executor
RE - Remitter of a cashier's check	AG - Agent
IN- Insured	AF - Attorney for
CN - Conservator	PO - Power of Attorney
CC - Co Conservator	PR - Personal Rep
PA - Payee	TC - Tenants in Common

### **4. APPENDIX B - OWNER TYPE CODES TABLE (ELECTRONIC ONLY)**

For Field "BC" on the PROPERTY Record and "Y" on the PROPADD Record	
OT	All owners except Aggregate or Unknown
UN	Unknown Owner (no name available)
AG	Aggregate owner

### **5. APPENDIX C - TANGIBLE PROPERTY TYPE CODES TABLE (ELECTRONIC ONLY)**

For Field "O" on the TANGIBLE Record	
SB01	Jewelry
SB02	Watches
SB03	Coins
SB04	Stock Certificates
SB05	Other Bonds
SB06	Personal I.D. Documents
SB07	Miscellaneous Other Items
SB08	Numismatic Bills
SB09	Foreign Bills
SB10	Foreign Coins
SB11	Checks, CD's, Travelers Checks
SB12	U.S. Savings Bonds
SB13	U.S. Gold
SB14	Foreign Gold
SB15	Cashier's Check, Face Value Monies

**6. APPENDIX D - FLORIDA PROPERTY CODE AND DORMANCY TABLE (FORMS & ELECTRONIC) \*\*\*SEE IMPORTANT FOOTNOTE**

CHAPTER 717, FLORIDA STATUTES			
PROPERTY TYPE	DORMANCY PERIOD (YEARS)	PROPERTY CODE	STATUTORY REFERENCE
<b>FINANCIAL INSTITUTIONS</b>			
Bank Drafts	5	CK05	717.105
Cashiers Checks	5	CK01	717.105
CD Interest Payments	5	CK16	717.106
Certified Checks	5	CK02	717.105
Checking Accounts	5	AC01	717.106
Christmas Club Accounts	5	AC04	717.106
Credit Memo	5	CK12	717.1045(4)
Deposit to Secure Funds	5	AC05	717.106
Foreign Exchange Checks	5	CK09	717.105
Gift Certificates/Cards	5	MS12	717.1045(4)
Matured CD's or Savings Certificates	5	AC03	717.106
Money Orders	7	CK07	717.104(2)
Registered Checks	5	CK03	717.105
Savings Accounts	5	AC02	717.106
Suspense Accounts	5	AC08	717.106
Travelers Checks	15	CK08	717.104(1)
Treasurers Checks	5	CK04	717.105
Unidentified Deposits	5	AC07	717.106
<b>FINANCIAL INSTITUTIONS (TANGIBLE PROPERTY)</b>			
Contents of Safe Deposit Boxes	3	SD01	717.116
Contents of Safekeeping Repository	3	SD02	717.116
Other Tangible Property	3	SD03	717.116
Unclaimed Loan Collateral – NonCash	3	SD04	717.116
<b>INSURANCE COMPANIES</b>			
Demutualization Cash	2	DM01	717.1071
Demutualization Stock	2	DM02	717.1071
Agent Credit Balances	5	IN08	717.107
Death Benefits Due Beneficiaries	5	IN03	717.107
Group Policy Benefits	5	IN02	717.107
Individual Policy Benefits	5	IN01	717.107
Matured Life-Limiting Age	2	IN09	717.107
Other Amounts Due under Policy Terms	5	IN07	717.107
Premium Refunds on Individual	5	IN05	717.107
Proceeds from Matured Policy	5	IN04	717.107
Unidentified Remittances	5	IN06	717.107
<b>COURTS</b>			
Condemnation Awards	1	CT02	717.113
Deposit Made with Court	1	CT05	717.113
Escrow Funds	1	CT01	717.112(4) and 717.113
Missing Heir Funds	1	CT03	717.113
Suspense Accounts	1	CT04	717.113
<b>GENERAL</b>			
Checks Written Off	5	CK14	717.102
Expense Checks	5	CK10	717.102
Other O/S Official Checks	5	CK15	717.102
Pension Checks	5	CK11	717.112
Security Deposits	5	AC06	717.102
Vendor Checks	5	CK13	717.102
Warrants	5	CK06	717.102
<b>OTHER GENERAL</b>			
Accounts Payable	5	MS08	717.102

Bonuses	1	MI06	717.115
Commissions	1	MS02	717.115
Credit Balances on Accts Receivable	5	MS09	717.102
Customer Overpayments	5	MS05	717.102
Delay Rentals	5	MI07	717.102
Discounts Due	5	MS10	717.102
Involuntary Dissolution or Liquidation	6 months	MS15	717.111
Minimum Royalties	5	MI09	717.102
Misc. Intangible Property	5	MS17	717.102
Miscellaneous Checks	5	MS16	717.102
Net Revenue Interests	5	MI01	717.102
Overriding Royalties	5	MI03	717.102
Payment Goods & Services	5	MS04	717.102
Pension, Profit Sharing Plans	5	MS14	717.112
Production Payments	5	MI04	717.102
Refunds	5	MS11	717.102
Royalties	5	MI02	717.102
Shut-In Royalties	5	MI08	717.102
Suspense Liabilities	5	MS18	717.102
Unclaimed Loan Collateral-Cash	5	MS13	717.106
Unidentified Remittances	5	MS06	717.102
Unrefunded Overcharges	5	MS07	717.102
Wages, Payroll, Salary	1	MS01	717.115
Worker Comp Benefits	5	MS03	717.102
Working Interests	5	MI05	717.102
SECURITIES RELATED			
Bearer Bond Principal – State and Local Government	1	SC07	717.112(5)
Bearer Bond Principal – Corporate	3	SC21	717.1101
Bearer Bond Interest – State and Local Government	1	SC22	717.112(5)
Bearer Bond Interest – Corporate	3	SC23	717.1101
Registered Bond Principal –State and Local Government	1	SC18	717-112(5)
Registered Bond Principal – Corporate	3	SC24	717.1101
Registered Bond Interest – State and Local Government	1	SC02	717-112(5)
Registered Bond Interest – Corporate	3	SC25	717.1101
Bonds (physical bonds and debentures)	3	SC14	717.1101
Cash in Lieu of Fractional Shares	3	SC09	717.1101
Credit Balances	3	SC20	717.1101(4)
Dividend Reinvestment Plans	3	SC19	717.1101
Equity Payments	3	SC04	717.1101
Funds Paid Toward Shares or Interest	3	SC06	717.1101
Mutual Fund Shares	3	SC16	717.1101
Other Certificates of Stock	3	SC11	717.1101
Profits	3	SC05	717.1101(4)
Shares of Stock & Underlying Shares	3	SC08	717.1101
Stock Redemption Funds	3	SC13	717.1101
Stock Warrants	3	SC17	717.1101
Unclaimed Dividends	3	SC01	717.1101
Unexchanged Stock of Successor Corp.	3	SC10	717.1101
US Government Securities	1	SC15	717.112(5)
FIDUCIARIES			
Escrow Funds	5	TR04	717.112
Fiduciary Funds	5	TR03	717.112
Paying Agent Accounts	5	TR01	717.112
Trust Vouchers	5	TR06	717.112
Undelivered or Uncashed Dividends	5	TR02	717.112

UTILITY COMPANIES			
Membership Fees	5	UT02	717.102
Refunds or Rebates	5	UT03	717.102
Utility Deposits	1	UT01	717.108

<b>***COURTS AND GOVERNMENTAL AGENCIES - Including any court, government or governmental subdivision or agency, public corporation or public authority</b>			
All Property Held by Courts and Government Agencies Regardless of Property Type (unless otherwise provided by a specific Florida Statute)	1 Year Dormancy Period		717.112(5) and 717.113

## 7. APPENDIX E - SAMPLE DUE DILIGENCE LETTER

January 1, 20XX

Mr. and Mrs. Good Customer  
100 Any Street  
City, State 23218

Dear Mr. and Mrs. Customer:

It is our policy to review and update our account records periodically. Our records of your (type) account indicate no transactions as of (LAST DATE OF ACTIVITY). State law requires us to report and remit the funds in this account to the state if we have not had customer-generated activity with you for a specified period of time. To prevent us from reporting and remitting your account to the state unclaimed property office, please check the appropriate box, sign in the space provided below, and return this form to us no later than (2 weeks) to (input address).

The above address information is correct for the account and I am aware of the account.

Please change the account holder(s) name and/or address as follows:

\_\_\_\_\_  
\_\_\_\_\_

I wish to close this account. Please send a check for the close-out amount to the following address:

\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

Your assistance is appreciated. If we can assist you in any way, please contact our office at (xxx) xxx-xxxx.

Sincerely

**NOTE: This is intended only as an example of a due diligence letter. The holder should design the due diligence letter to meet their needs.**

## 8. APPENDIX F - UNCLAIMED PROPERTY STAFF

Reporting Section: All questions regarding filing deadlines, extensions, penalties, dormancy periods, and electronic filing should be directed to this number or e-mail address.

(850) 413.5522  
(850) 413.3018 Fax  
[EReporting@MyFloridaCFO.com](mailto:EReporting@MyFloridaCFO.com)

### Name and Title

### E-mail Address

#### **Reporting Section**

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Marie Kemp, Holder Reimbursement Supervisor

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Calvin Sloan, Asset Management Administrator

[Calvin.Sloan@MyFloridaCFO.com](mailto:Calvin.Sloan@MyFloridaCFO.com)

Thomas Egler, Vault Supervisor

[Thomas.Egler@MyFloridaCFO.com](mailto:Thomas.Egler@MyFloridaCFO.com)

Customer Service: All questions regarding pending claims, researching for property, and holder reimbursements should be directed to this number.

(888) 258.2253 (Toll-Free in FL)  
(850) 413.5555 (Outside of FL)

General Telephone Numbers for all Sections

(850) 413.5515  
(850) 413.3017 Fax