

UNIVERSAL HOLDER FACE SHEET (must be completed and attached with all reports)

UFS-1(Rev. 04/09)

Mail to: California State Controller's Office, John Chiang, State Controller, Unclaimed Property Division, P.O. Box 942850, Sacramento, CA 94250

Notice Report

- Due Before November 1 or
 Life Insurance Due Before May 1

Or**Remit Report**

- Due Between June 1 and June 15 or
 Life Insurance Due Between December 1 and December 15

Section A—Holder Information

FEIN	Branch Number	Report As of Date	Check Number / EFT Debit Ref Number (Remit Report Only)
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Section B—Report Completion Contact

Holder Name

Street Address

P.O. Box Number	City	State	Zip Code	Country
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Contact Name (For report completion)	Title	Phone Number	Extension
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E-mail Address (Optional)

Section C—Property Owner Contact

Holder Name

Street Address

P.O. Box Number	City	State	Zip Code	Country
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Contact Name	Title	Phone Number	Extension
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E-mail Address (Optional)

Section D—Holder Agent Contact (If Applicable)

Agent Name

Street Address

P.O. Box Number	City	State	Zip Code	Country
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Contact Name (For report completion)	Title	Phone Number	Extension
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E-mail Address (Optional)

Section E—Prior Holder Name If you are the successor to a previous holder of property, or if you have changed your name, please list such prior name

Name

Section F—Holder Report Totals

Total Reported/Remitted Dollars

Total Reported/Remitted Shares

Includes Safe Deposit Box

 Yes No**Any Remittance of \$20,000.00 or more must be paid by Electronic Funds Transfer (EFT), pursuant to CCP Section 1532****Section G - Holder Business Information**

Organization Type:

Incorporation State:

Incorporation Date: / /

NAICS Code:

Charter

Federal or State

Charter Date: / /

Section H— Demutualization Proceeds This report includes proceeds from the demutualization of an insurance company for the category checked below.**Date of Demutualization**

- Distribution not sent, because holder did not have a valid address (CCP Section 1515.5 (a)). Abandoned Immediately
 Distribution sent but returned by the post office as undeliverable (CCP section 1515.5 (b)). Abandoned after two years
 Distribution sent and not returned by the post office (CCP Section 1515.5 (c)). Abandoned after three years

Section I: VerificationSection I- **Verification** If made by an individual, shall be verified by the individual; if made by a partnership, by a partner; if made by an unincorporated association or private corporation, by an officer; if made by a public corporation, by its chief fiscal officer or other employee authorized by the holder (CCP Section 1530(e)).

The undersigned, _____ declares, under penalty of perjury, that, to the best of (his) (her) knowledge and belief, the following sheets contain a full, true, and complete report of unclaimed property which is presumed unclaimed under the provisions of Part 3, Title 10, Chapter 7, Code of Civil Procedure, commencing with Section 1500, and Title 2, California Administrative Code, Sections 1150 et seq. **The Undersigned also confirms that all properties not listed on the Remit Report, which were initially included on the Notice Report, were due to contact by the apparent owner, or the property being reactivated or returned to the rightful owner. Properties not included on the Notice Report cannot be listed on the Remit Report and must be reported on a Supplemental Notice Report.**

Signature

Title

Date