

County of Yolo

www.yolocounty.org

DEPARTMENT OF FINANCIAL SERVICES PO BOX 1268 WOODLAND, CA 95776

UNCLAIMED WARRANT AFFIDAVIT FOR INDIVIDUAL

I,	, do hereby state that I am legal owner or payee
	, dated,
in the amount of \$	
	y that the above information is true and correct to the best of my n theday of, at,
Payee Signature	
Payee Address (Please provi Statement)	de proof of address – e.g. Driver's License, Utility Bill or Bank
Payee City, State and Zip Coo	e
State of)
State of County of) SS.)
	Subscribed and sworn to (or affirmed) before me on this
	day of, by
	Name of Signer
	proved to me on the basis of satisfactory evidence to be the person who appeared before me.
Affix Notary Seal Above	Signature of Notary Public

THIS AFFIDAVIT MUST BE NOTARIZED IF THE CLAIM AMOUNT IS GREATER THAN \$100.

SEND COMPLETED FORM TO: YOLO COUNTY DEPARTMENT OF FINANCIAL SERVICES, PO BOX 1268, WOODLAND CA 95776.