



Department of the Treasury

COMMONWEALTH OF VIRGINIA

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

AP-1

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

Holder Number _____
 Holder Name _____
 Address _____
 City _____ State _____ Zip _____
 Federal Tax ID _____
 Contact Name _____
 Telephone Number _____
 Fax Number _____
 E-Mail address _____
 State of Incorporation _____ State of Headquarters (if different) _____
 Date of Incorporation _____
 Report Year _____ First Time Report? Yes No

Type of Report: (check one)

- Regular (Annual)
- Audit
- Voluntary Compliance
- Negative (not required)

Reported Total Amounts:

_____ Cash
 _____ Security Shares
 _____ # of Tangible Accounts

Total shares remitted:

_____ via DTC
 _____ via DRP statement
 _____ via House Account statement

Report Media: (check one)

- Hardcopy (Paper)
- Uploaded (NAUPA file)

Remittance:

check _____ check # _____ Amount _____
 check _____ check # _____ Amount _____
 wire _____ wire ID # _____ Amount _____
 ACH _____ ACH # _____ Amount _____
 ATA / REDI _____ ID # _____ Amount _____

Make Checks Payable To:
Treasurer of Virginia

Need ACH/wire Acct. Info.?
Holder ID#? Send request to:
Report.Remit@trs.virginia.gov

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

-I CERTIFY THAT DUE DILIGENCE WAS PERFORMED ON THE FOLLOWING DATES

FROM _____ TO _____

SIGNATURE _____ Print _____

TITLE _____

DATE _____