

NORTH COAST COUNTY WATER DISTRICT

UNCLAIMED MONEY – CLAIM FORM

Pursuant to California Government Code Section 50052, I wish to file a claim for a previously unclaimed check in the amount of \$_____. The grounds on which I file this claim are:

Vendor or Individual Name (Printed)

Vendor or Individual Name (Signature)

Telephone Number

Address

City / State / Zip Code

For North Coast County Water District Only:

Proof of Identity Verified: _____

Driver's License /Passport/ID Card/Other: _____