



TOWN OF SAUGUS

Office of the Town Treasurer
Wendy A. Hatch

Abandoned and Unclaimed Funds Form

To make a claim, return this form to the office of the Town Treasurer accompanied by a copy of a valid photo ID. You must provide your name, address, telephone number, and signature for your claim to be processed. If the payee of unclaimed funds is deceased, you will need to provide evidence that all claimants(s) are authorized executors(s) of the estate.

If all evidence requested by the Town Treasurer is not received, this claim will not be paid. The Town of Saugus reserves the right to require additional information it deems necessary to substantiate a claim.

Name as it appears on the Unclaimed Property List: _____

Current name or personal representative: _____

Current address: _____

City: _____ State: _____ Zip: _____

Phone number: _____ Email address: _____

An original signature is required. Electronic copies, photocopies, or faxed copies will not be accepted.

Signature of Claimant

Date

Signature of Personal Representative (if applicable)

Date

For Town Treasurer's Office Use Only

Approved for payment Date

Check # of Claim

Date of Issue

Amount of Claim

Claim #

Replacement Check #

Date of Re-Issue