

Unclaimed Property Office Stale Check Reissuance Form

Claimants are required to furnish the University with sufficient proof and documentation to verify entitlement to payment. Please provide all information requested below in order to expedite the processing of your claim. Please print all information clearly.

Claimant Information

Name:			
Address:			
Address co	nt:		
City:		State:	Zip:
Phone Number:		Email:	
		Property Information property you are claiming buill expedite the processing of	elow. Including the original check of your claim.
Check:	Number	Date	Amount
Check:	Number	Date	Amount
Check:	Number	Date	Amount
Check:	Number	 Date	Amount
that indicate	es your relationship to t	the organization.	iness card or other documentation am legally entitled to these funds.
Signature: _			_ Date:
http://financ	ce.columbia.edu/conten	visit the Unclaimed Property tt/unclaimed-property. If you reissued please destroy it.	
Return to:	to: Columbia University Office of the Controller- Unclaimed Property 615 West 131 st Street 3 rd Floor, Mail Code 8799 New York, NY 10027		

Claims may be submitted via regular mail or by utilizing our webform, located at http://finance.columbia.edu/content/UPO-Form.