

Michigan Annual Report of Unclaimed Cash and/or Safe Deposit Boxes

Issued under Public Act 29 of 1995. Filing is mandatory.

| | |
|---|-------------------|
| Page ____ of ____ | |
| Holder Name | UPD Branch ID No. |
| Federal Employer ID Number | Report Year |
| Report Number <input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 | |

Attach this form to the **Michigan Holder Transmittal** (Form 2011). Complete this report for cash items and for safety deposit box contents **only**. All items less than \$50 may be reported in aggregate (see aggregate filing instructions). If you are reporting more than ten properties, you must submit your report on diskette/CD Rom. See instructions for magnetic filing. Report securities separately (Form 3164).

Properties. Complete all items for each property. You must report all available owner information.

| | | | | | | | | |
|-------------------------|-------------|---|--------------|----------------------------------|--------------------------------------|-----------------------|--|--------------------------|
| a. Property Description | b. P. Type | c. Owner's Name (Last, First, MI), Last Known Address | d. Rel. Code | e. Social Security No. or FEIN | f. Safekeeping Fees (Enter Below) | | g. Date of Last Activity (YYYYMMDD) | |
| h. Identifying Number | i. Quantity | | | j. If interest bearing, enter %. | Type DR | Amount Deducted \$ | | k. Amount Remitted \$ |
| a. Property Description | b. P. Type | c. Owner's Name (Last, First, MI), Last Known Address | d. Rel. Code | e. Social Security No. or FEIN | f. Safekeeping Fees (Enter Below) | | g. Date of Last Activity (YYYYMMDD) | |
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Complete this item only on the **last page** of the report.
Enter the total dollars you are submitting with this report. \$

Total: This page only
\$