

Marsha Swanson, Mayor, Dist. 5  
Dustin Nigg, Mayor Pro Tem, Dist. 2  
Ben J. Benoit, Council Member, Dist. 1  
Bridgette Moore, Council Member, Dist. 4  
Joseph Morabito, Council Member, Dist. 3



23873 Clinton Keith Rd, Ste 201  
Wildomar, CA 92595  
951/677-7751 Phone  
951/698-1463 Fax  
[www.CityofWildomar.org](http://www.CityofWildomar.org)

## City of Wildomar

### **ADMINISTRATIVE SERVICES DEPARTMENT**

#### Unclaimed Money Policy

##### **Purpose:**

To establish the proper disposition and accounting for unclaimed money. California Government Code Sections 50050-50057 provide authority for this policy to be enacted by municipalities.

##### **Policy:**

1. Funds which are not the property of the City of Wildomar that remain unclaimed for a period of more than three (3) years will become the property of the City of Wildomar if no claim or verified complaint is filed and served, on or before the specific date stated in the public notice that is published in a newspaper of general circulation.
2. Any individual funds amounting to less than \$15.00 shall be transferred to the General Fund of the City after one (1) year and without the need to publish a public notice.
3. Any funds in which the depositor's name is unknown regardless of the amount shall be transferred to the General Fund of the City after one (1) year and without the need to publish a public notice.

##### **Procedures: Applicable to Policy #1 Above**

- Unclaimed funds over three (3) years old and over \$15.00 will be identified on an accrual basis.
- For funds that have been unclaimed for at least three (3) years, a notice will be published once a week for two (2) consecutive weeks in a newspaper of general circulation. The notice shall state the individual or business name (original depositor for receipts, the original vendor for stale-dated checks), the amount of money, the fund in which the money is held, and that the money will become the property of the City of Wildomar on a specific date. This date is to be not less than 45 days nor more than 60 days after the first publication. (Section 50051)

- On or prior to publication, a party of interest may file a claim for the funds with the Administrative Services Director. The claim must contain the claimant's name, address, telephone number, claim amount, tax identification number, and grounds for the claim. It must be submitted and accepted before the date identified in the notice as the date the funds become the property of the City of Wildomar. The Administrative Services Director can require additional information to help substantiate the claim and to establish the authority of the claimant to receive the funds. (Section 50052)
- Notwithstanding Section 50052, the Administrative Services Director may release the unclaimed monies to the depositor, their heir, beneficiary, or duly appointed representative if they are claimed prior to the date the funds become the property of the City of Wildomar and satisfactory proof has been submitted. (Section 50025.5)
- When the unclaimed funds become the property of the City of Wildomar, they will be deposited into a special fund. At least 45 days, but no more than 60 days after the published public notice, the funds may be transferred from the special fund into the City General Fund. (Section 50053)

### **Glossary:**

Unclaimed Monies may include but are not limited to, stale dated checks, bond coupons, trust funds, deposits held for various purposes by City departments, and overpayments for City Services.

### **Attachments:**

1. Unclaimed Money – Instruction Sheet
2. Unclaimed Money – Claim Form
3. Unclaimed Money – Sample Notice



## City of Wildomar

Mail to:  
City of Wildomar  
Attn: Administrative Services Department  
23873 Clinton Keith Rd #201  
Wildomar, CA 92595

### UNCLAIMED MONEY CLAIM FORM

Pursuant to California Government Code §50052, I wish to file a claim for previously unclaimed funds in the amount of \$ \_\_\_\_\_ which were published in the \_\_\_\_\_ Newspaper on \_\_\_\_\_. The grounds on which I am filing this claim are:

Agent or Individual Name

Taxpayer ID No. or Social Security No.

Address

City, State, Zip Code

Home Telephone

Work Telephone

I hereby certify that the above information is true and correct and is being submitted to the City of Wildomar to substantiate my claim to monies paid to the City. I further certify that I have the authority and right to claim and receive payment of these monies and hereby release the City of Wildomar, its directors, employees, representatives, attorneys and agents from all liability and further obligation with respect to this claim.

Printed name of Claimant

Signature of Claimant

Date Signed

#### OFFICE USE ONLY

Approved [ ]

Denied [ ]

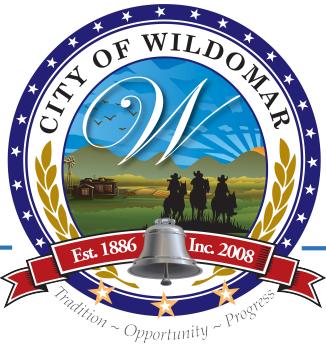
Administrative Services Director

Date

City Manager

Date

Account Number



## City of Wildomar

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### UNCLAIMED MONEY INSTRUCTION SHEET

**Using this instruction sheet, determine and provide the appropriate documents in order to process your claim, and return them with your completed Unclaimed Money form.**

All claimants must review SECTION A for required documentation. If you are an HEIR or BENEFICIARY of the deceased owner, refer to SECTIONS A & B.

#### SECTION A: CLAIMANT IDENTIFICATION

- 1) Copy of a photo identification (e.g., driver's license, state identification card, passport, etc.) for each claimant;
- 2) Copy of each claimant's Social Security card or any other document showing the claimant's Social Security number (e.g., federal or state income tax return or pay stub, etc.), if applicable;
- 3) Original check, deposit, or instrument identified in the "Unclaimed money publication";
- 4) Document (e.g., correspondence, statement, etc.) associating you or the owner with the business or named in the unclaimed money publication.

**NOTE: IF ITEM 3 OR 4 IS NOT AVAILABLE, YOUR CLAIM MAY BE DENIED.**

#### SECTION B: DECEASED OWNER

If you are an HEIR of the deceased owner named on the account, you are required to submit ALL items under SECTION A, the death certificate of the deceased owner, PLUS one of the following documents:

- 5) Copy of Currently Certified Letters, dated within the past six months, appointing the Executor or Administrator of the descendant's estate, and the Estate Tax Identification number; or
- 6) Complete copy of the court Ordered Distribution of the Descendant's Estate; or
- 7) If the distribution of the estate was not ordered by a court, a complete copy of the descendant's Will and/or Trust Agreement; and a completed Declaration Under Probate code Section 13101 FORM; or
- 8) If no Will or Trust Agreement exists, a completed Declaration Under Probate Code Section 13101 form and a Table of Heirship form. You may obtain these documents at the State Controller's web site at <http://www.sco.ca.gov/col/ucp/forms/index.shtml>.

If you are providing the death certificate and items 5, 6, or 8 proceed to SECTION C.

#### SECTION C: SIGNED CLAIM FORM/AFFIRMATION

- 9) If the "Amount" (listed on the front page of this Claim Form) is \$500 or more, complete, sign, and NOTARIZE the affirmation.
- 10) If the "Amount" is less than \$500, complete and sign the Affirmation.

**Confirm that all required documents are included and send the entire package to the address on the front page of the Claim Form.**



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### SAMPLE NOTICE

Notice is hereby given that the City of Wildomar is holding funds for the following persons or entities. If said funds are not claimed by MM DD YYYY, these funds will become the property of the City of Wildomar in accordance with California Government Code Sections 50050–50056. These funds may be released to the depositor, their heir, beneficiary or duly appointed representative provided a claim form has been completed with the necessary information.

The Unclaimed Money Claim Form is available at the City of Wildomar Administrative Services Department, 23873 Clinton Keith Rd, Suite #201, Wildomar, CA 92595, 951-677-7751 or on the City's website at [www.cityofwildomar.org](http://www.cityofwildomar.org). Required claim information includes name, address, phone number, tax identification number or social security number, amount of claim, and grounds on which claim is founded. Once a claim is submitted, the Director of Finance will determine what, if any, addition information is necessary.

Persons/ entities with funds on deposit for over three years:

NAME	AMOUNT	SOURCE OF FUNDS
John Doe	\$345.78	General Fund
Jane Smith	\$127.52	General Fund
Acme Development	\$1,200.00	Developer Deposit