EXHIBIT B

CITY OF MONTEREY PARK
Unclaimed Money - Claim Form

Return completed form to:
City of Monterey Park
320 W. Newmark Avenue
Monterey Park, CA 91754

Pursuant to Government Code § 50052, I wish to file a claim for previously unclaimed monies in the amount of $ _____ that was published in the _____ on _____. The grounds on which I file this claim are:

_____

_____

_____

_____

_____ _____
Vendor or Individual Name (printed) Taxpayer I.D. or Social Security No.

_____ _____
Vendor or Individual Name (signature) Telephone Number

_____
Address

_____
City/State/Zip Code

FOR FINANCE DEPARTMENT ONLY

Name of Payee: _____
Original Check No. _____ Check Date _____ Check Amount _____
Replacement Check No. _____ Check Date _____ Check Amount _____
Proof of Identity Verified: Driver's License _____ Social Security Card _____
Birth Certificate_____
Verified By: _____ Date: _____
Approved By: _____ Date: _____