

**ARIZONA FORM  
600C**

Arizona Department of Revenue  
**Claim for Unclaimed Property - Business Entity Claim**

**Mail to:** Arizona Department of Revenue • Unclaimed Property Unit • PO Box 29026 • Phoenix, AZ 85038-9026

**Email to:** UnclaimedProperty@azdor.gov • This form requires a physical signature.

**You must read page 2, which may be on the reverse side, before completing this form.**

1

Property ID Number or a brief description of the property you are claiming ▼

Original Property Owner's Name ▼

Original Property Owner's Social Security Number or Tax Identification Number ▼

Original Unclaimed Property Owner's Address as reported by the Holder ▼  Unknown

2

Claimant's Name ▼  Same as above

Claimant's Social Security or Tax Identification Number ▼  Same as above Agent's Name ▼

Email Address ▼

Telephone Number ▼

Address where you would like correspondence, including payment sent ▼

City or town ▼

State ▼

ZIP Code ▼

3

Please read each statement carefully before answering. One of the following statements must be true in order to claim.

- |   | Yes                      | No                       |
|---|--------------------------|--------------------------|
| 3a. This entity is/was a sole proprietorship .....                                  | <input type="checkbox"/> | <input type="checkbox"/> |
| 3b. This entity is/was a partnership .....  | <input type="checkbox"/> | <input type="checkbox"/> |
| 3c. This entity is/was a corporation, company, or not-for-profit organization ..... | <input type="checkbox"/> | <input type="checkbox"/> |
| 3d. I am the court appointed bankruptcy trustee for this entity .....               | <input type="checkbox"/> | <input type="checkbox"/> |
| 3e. This entity is a government agency .....  | <input type="checkbox"/> | <input type="checkbox"/> |

4

In consideration of the payment or delivery of unclaimed property as a result of this claim, I agree to indemnify the State of Arizona and hold it harmless for and from all claims and loss, cost, damages and expenses that the State of Arizona may sustain by reason of turning over the said property and by reason of its refusal hereafter to pay said property or any part thereof to any other person(s). I agree that if, for any reason, it is found that I am not entitled to payments I receive as a result of this claim or I receive duplicate payment, I will return the funds to the Arizona Department of Revenue within 15 days of demand. I swear and attest that all claims, assertions and signatures made in this claim are true and material and that all photocopies I have or will provide are the same as the original documents. Furthermore, I swear and acknowledge that any false statement made in this claim subjects me to penalties related to perjury and the subornation of perjury.

\_\_\_\_\_  
**Claimant's Signature ▲**

\_\_\_\_\_  
**Date ▲**

\_\_\_\_\_  
**Claimant's Signature ▲**

\_\_\_\_\_  
**Date ▲**

STATE OF \_\_\_\_\_

SUBSCRIBED AND SWORN BEFORE ME THIS \_\_\_\_\_ DAY OF \_\_\_\_\_

(NOTARY SEAL)

20\_\_\_\_\_, BY:

\_\_\_\_\_  
PRINT NAME OF SIGNOR

\_\_\_\_\_  
NOTARY PUBLIC

Unclaimed Property Hotline: (602) 364-0380 or outside the Phoenix area toll free: (877) 492-9957  
For additional information see our website • [www.azdor.gov/unclaimed-property](http://www.azdor.gov/unclaimed-property)

**This form should only be used to claim property on behalf of an entity.**

If you are claiming property as the original owner (Form 600A), on behalf of a deceased owner (Form 600B) or as the agent of a living owner (Form 600D), you must complete the appropriate form.

**FORM INSTRUCTIONS**

**Section 1 of page 1**

**Regardless of how you answer this Section, we will do a complete search of our database to identify and work to return all unclaimed property belonging to the pertinent owner.**

- In this section, we ask that you please provide the property ID or a brief description of the property you are claiming. It is not required to complete this section but we ask, if known, that you provide the property ID, if not known it is not required nor helpful to collect this number. If you do not know the property ID number, but are looking for a specific lost asset, it is helpful to give us a brief description, such as, "Southwest Cactus Wren Federal Credit Union Money Order Check #1008 321 6587" or "IRA funds from employer Jackson and Lynch Welding". Lastly, if you simply wish to collect all miscellaneous unclaimed property you may leave the section blank.
- In the remaining questions in this section, you are required to provide the name of the individual you believe to be the owner and if known, the address, and tax ID number reported by the business or entity that remitted the property to the State of Arizona. If unknown, or if you are claiming numerous properties you may leave this Section blank.

**Section 2 of page 1**

It is very important that you complete this Section fully and accurately. You are required to provide us with the current or correct name and the current/correct contact information for the entity/ organization you represent. **You may not use one claim form and submission for multiple entities or organizations, a claim is required for each.** If you provide an email address, we will provide you with a receipt of your claim with 15 to 20 business days of receipt; this information is no longer provided in hard copy. Providing an email address also expedites communication and helps us more efficiently serve you. **The address that you record in this Section will be the address that payment will be sent to should your claim be approved.**

**Section 3 of page 1**

**In this Section you are required to declare the type of entity you are representing.** If you are acting as an heir-finder or locator, please see our website for instructions for filing on behalf of your client.

**Section 4 of page 1**

**You must sign and date the form, we require a physical signature.** In this section, please read the declarations carefully. There is a notary section under the signature, you may choose to have the form notarized or provide a legible photocopy of valid government issued photo identification; such as, a driver's license or passport. If there are joint owners, they must also sign the claim form (see evidence requirements below for all joint owner exceptions).

**YOU ARE REQUIRED TO SUBMIT THE FOLLOWING EVIDENCE WITH THIS FORM:**

- ✓ **You must provide proof of your identity as the claimant's representative.** Please provide a clear copy of official photo identification or have your signature on the claim form notarized.
- ✓ **You must provide proof of ownership.** The Arizona Unclaimed Property Section does not release funds based on name similarity alone, must provide a match to another reported factor, most commonly social security number or match to the reported (not current) address.
- Provide proof that the entity/organization you represent did business or received mail at the address reported to the State of Arizona as the last known address of the original owner.
- Provide proof of the Tax ID Number (SSN/FEIN) of the entity/organization you represent.
- If your entity name has changed since the property was reported to the State of Arizona, you must provide verification of the change, such as, documentation of acquisition or merger.
- If the entity you represent has been dissolved, you must provide legal documentation of the dissolution.
- ✓ **You are required to prove that you are an individual that the State of Arizona recognizes as an authorized representative for the entity/organization you are claiming on behalf of.**
- If you answered yes to question 3a, you are required to complete and submit an Affidavit of Sole Proprietorship, Arizona Form 630.
- If you answered yes to question 3b, you are required to provide a complete and un-redacted copy of the partnership agreement.
- If you answered yes to question 3c, you are required to complete and submit an Unclaimed Property Disclosure / Representation Authorization, Arizona Form 285UP.
- If you answered yes to question 3d, you are required to provide your certified letters of office. If an entity has been appointed as trustee, you must submit a completed authorization to represent release, Arizona form 285UP.
- If you answered yes to question 3e, you are required to submit a copy of your employer issued ID.

Please be aware that each claim is unique and that once your claim is received, the Section may need to request additional information and will allow you an opportunity to provide the additional evidence rather than denying your claim. **If you have any questions or cannot provide the evidence requested we recommend that you complete the claim form and submit the evidence, you can provide, along with a note explaining your circumstances.** A claims specialist may be able to clarify and assist you with the evidence requirement.

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