

Department of Revenue
Unclaimed Property Section

Business Affidavit

RE: Unclaimed Property Account Number: _____

The total amount is approximately: \$ _____

I, _____, hereby affirm that I am employed by or am an
(Print or Type Name)

officer of _____ and am duly authorized to claim such funds as
may be held by you.

In the event a superior claim is received and honored by the Department of Revenue, I will hold harmless the
payer of the claim, and will return such funds as received under this claim.

(Signature)

(Title Held)

Subscribed and sworn to before me this _____ day of _____
(Day) (Month) (Year)

(Notary's Signature)

Notary in and for the state of _____

My commission expires _____

If the owner is a business/agency/institution:

1. Copy this form onto your company's letterhead. If your company does not have letterhead, complete the affidavit and attach a copy of your business license or other documentation identifying your business as a legal entity.
2. Complete the form.
3. Have your signature notarized.
4. Return the affidavit, completed claim form and **photo ID** to our office.



**Mail all affidavit(s) with the signed
and dated claim form(s) to:**

State of Washington
Department of Revenue
Unclaimed Property Section
PO Box 47477
Olympia, WA 98504-7477

*Multiple claims? Use **one** affidavit for all and list the total number of claims and dollar amount.*

Note: *if the business is closed do not use the Business Affidavit, instead provide a copy of a IRS Schedule K-1 which lists the shareholders and their ownership.*

For tax assistance visit please call 1-800-435-2429. To inquire about the availability of this document in an alternate format, please call 1-800-647-7706. Teletype (TTY) users may use the Washington Relay Service by calling 711.