

Please complete this form and return it to ATMC to file a claim and certify you are the rightful owner of property held by ATMC. Property held by ATMC is property such as uncashed deposit refund checks or capital credit refund checks issued by ATMC which have not been escheated to the applicable state government. Incomplete claim forms and claims for property already escheated to the applicable state government will not be accepted. To claim property that has been escheated to a state, please contact the applicable state for information about filing a claim.

**Step 1 - Provide Proof of Social Security Number (if joint account, provide proof for all individuals):**

Include with your form a **COPY** of any legal document showing your social security number, such as:

- Social security card
- W-2 form
- Income tax form
- Pay stub

**Step 2 - Provide Proof of Address where ATMC Service was provided (if joint account, provide proof for one individual):**

Include with your form a **COPY** of any legal document showing your name and ATMC service address, such as:

- Driver's license
- W-2 form
- Income tax form
- Pay stub
- City/County tax bill
- Vehicle title or registration
- Bank statement
- Blank or canceled check, deposit slip
- Marriage/death certificates, divorce decree
- Utility, medical, legal, insurance bill etc.

**Step 3 - Provide your current information (if joint account, provide name of all account holders)**

Your Full Name/ Joint Name	
Your Current Address	
Your Current Telephone Number	
Your Date of Birth	

**Step 4 - Have your signature notarized and return the form to ATMC at the following address:**

ATMC  
Attn: Unclaimed Property  
P.O. Box 3198  
Shallotte, NC 28459

**Questions - Please contact ATMC at 910-755-1645 if you have questions about how to complete this form.**

**Certification**

I do hereby certify that I am \_\_\_\_\_ and that I previously had service with ATMC. I also certify that the information I have provided on this form is true and accurate.  
(Print Name)

Signature \_\_\_\_\_ Date \_\_\_\_\_

**Acknowledgement**

State of \_\_\_\_\_ County

I, \_\_\_\_\_, Notary Public, hereby certify that \_\_\_\_\_ personally appeared before me this day and acknowledged the due execution of the foregoing.

Witness my hand and seal this \_\_\_\_ day of \_\_\_\_\_ 20\_\_.

My commission expires: \_\_\_\_\_.

{Official Seal}

\_\_\_\_\_  
Notary Public

FOR ATMC USE ONLY			
SS# Document	Reviewed By	Address Document	Reviewed By