Stephen M. Place
Presiding Judge

Susanne M. Rizo
Judge

Ali R. McMurry
Court Executive Officer

Superior Court of California
County of Inyo

301 West Line Street
Bishop, California 93514
(760) 872-3038

Unclaimed Funds Instructions and Forms

If you are claiming funds, please complete the following:

STEP 1: Fill out the attached forms (**Claim Affirmation Form** and **Claim for Money Held**). When completing the claim forms, please type or print legibly in blue or black ink. Claims that are illegible will be returned. Claims must be made using the court's forms. Any modifications made to the court's forms will not be accepted. Each claimant is required to fill out a separate set of forms for each claim.

STEP 2: You must sign the Claim Affirmation Form and have it notarized if your claim is over $1,000 or your claim will not be processed. Please read all the instructions and make copies of all required documents (driver's license, etc.). Owners or heirs are required to provide documentation to validate their claims.

STEP 3: Please send the completed forms along with all the required materials to:

Attn: Ali R. McMurry, Court Executive Officer
Inyo Superior Court
301 W Line Street
Bishop, CA 93514

For additional questions, please call the court's fiscal department at 760-872-4515.

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Claim Affirmation Form

The undersigned claimant certifies, under penalty of perjury, the claimant has read the claim and knows the contents thereof and the claimant is the owner of the said claim and the person entitled to receive the money set forth in said claim.

The claimant agrees to indemnify and hold harmless the state, the courts and their agents, officers, and employees from any loss resulting from the payment of said claims.

Current information and signature must be provided for each claimant or your claim will not be processed

Claimant's Information:

LAST NAME OR BUSINESS	FIRST NAME		BIRTH DATE	
CURRENT MAILING ADDRESS	**CITY**	**STATE/ PROVINCE**	**ZIP**	**COUNTRY**
DAYTIME PHONE	**CLAIMANT OR AUTHORIZED AGENT SIGNATURE**			**DATE**

Your signature must be notarized if the claim amount is $1,000 or greater
For claims filed for a business, the authorized owner's signature is required. For claims filed for an estate or trust, the signature of the executor, administrator or attorney is required.

State of California
County of _____

Subscribed and sworn to (or affirmed) before me on this _____ day of _____, 20___, by _____, proved to me on the basis of satisfactory evidence to be the person(s) who appeared before me.

Signature _____ (Seal)

Privacy Notification
Your Social Security number and other documents may be requested for identification and processing of your claim.

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Claim for Money Held

Mail To:

Attn: Ali R. McMurry, Court Executive Officer
Inyo Superior Court
301 W Line Street
Bishop, CA 93514

Date Submitted: _____

Owner's Name (As Held by Court): _____

Street Address: _____

City, State, Zip Code: _____

Amount of Claim: $_____

Claimant's Name (Should Match Claim Affirmation): _____

Relationship to Owner: _____

Reason for Claim: _____

A separate form is required for each account claimed.

AFFIRMATION AND SIGNATURE *(by claimant)*

I hereby affirm, under penalty of perjury, that I am duly authorized to make said claim upon the Superior Court of California, County of Inyo. I hereby agree to indemnify and hold harmless the state, the courts, and their officers and employees from any loss, including attorney's fees, incurred as a result of payment of the amount claimed.

Signature: _____ Date: _____

COURT'S USE ONLY

□ Approved, Paid to Claimant Shown Above
□ Denied, Not an Authorized Claim
Date:
By: