



Office of the State Treasurer
P.O. Box 138 Jackson, MS 39205
Lynn Fitch, Treasurer

Tony Geiger
Director, Unclaimed Property
601.359.3600

November 26, 2013

MADISON CO BOARD OF SUPV
P O BOX 608
ATTN: SHELTON VANCE
CANTON, MS 39046

RE: Claim# 225137

It is such a privilege to be able to return this money to you. I am enclosing your payment for the following:

<u>Holder</u>	<u>Amount</u>
AE CORPORATE SERVICES	\$3,551.40
AMERICAN GENERAL FINANCE INC	\$348.22
BANCORPSOUTH (ALL LOCATIONS)	\$687.41
BAPTIST MEMORIAL HOSPITAL - GOLDEN TRIANGLE	\$76.85
BASC	\$410.74
BELLSOUTH TELECOMMUNICATIONS	\$114.06
COCA COLA REFRESHMENTS USA INC	\$590.66
DOVENMUEHLE MORTGAGE INC	\$119.87
KRISPY KREME DOUGHNUT	\$597.12
NATIONAL CASUALTY CO	\$292.38
OFFICE DEPOT INC	\$114.35

PHH VEHICLE MANAGEMENT SERVICE	\$413.79
SOUTHEASTERN FREIGHT LINES INC	\$92.76
STATE OF MISSISSIPPI UNCASHED WARRANT	\$2,326.07
STATE OF TEXAS	\$138.50
STATE OF UTAH	\$451.21
TD AUTO FINANCE LLC	\$376.43
VIKING OFFICE PRODUCTS	\$80.35

My team in the Unclaimed Property Division works hard to identify and return the millions of dollars we are holding to individuals like yourself who would otherwise never know about these funds.

I am honored to serve the people of Mississippi. If my staff or I can be of assistance to you please do not hesitate to call.

Sincerely,



Lynn Fitch
Treasurer

VENDOR V99171MISCO AGENCY NAME TREASURY
 ADDRESS P. O. BOX 138
 CITY JACKSON, MS 39205-0138
 PAY DATE 12-02-13
 FOR E-PAY INFO, GO TO WWW.BANKOFAMERICA.COM/PAYMODE/MS AGY PHONE (601) 359-2163
 INV. DATE INVOICE NUMBER P.O.NUMBER DESCRIPTION / ACCOUNT NUMBER NET INVOICE AMOUNT

000000244506

\$ 10,782.17

RECEIVED

DEC 03 2013

WARRANT TOTAL \$ 10,782.17

REMITTANCE ADVICE, PLEASE DETACH

THIS DOCUMENT HAS A BLUE BACKGROUND ON THE FACE AND AN ARTIFICIAL WATERMARK ON THE BACK - HOLD AT AN ANGLE TO VIEW.

NO. 013627955

85-27
653



THE STATE OF MISSISSIPPI

DEPARTMENT OF FINANCE AND ADMINISTRATION
P. O. BOX 1060 JACKSON, MS. 39215-1060

WARRANT ON THE STATE TREASURER
VOID AFTER 1 YEAR

*****10,782 DOLLARS AND 17 CENTS*****

PAY TO THE
ORDER OF:

MADISON CO BOARD OF SUPV
P O BOX 608
ATTN: SHELTON VANCE
CANTON, MS 39046

MO.	DA.	YR.	PAY THIS AMOUNT
12	02	13	\$*****10,782.17

Kenn J. Upchurch
EXECUTIVE DIRECTOR-DFA



State of Mississippi Treasury Department
P O Box 138 Jackson, MS 39205 Telephone 601-359-3534
www.treasury.ms.gov

LYNN FITCH
State Treasurer

Tony Geiger, Director
Unclaimed Property Division

Unclaimed Property Claim Form

PROPERTY ID # 1694844

Instructions: Read documentation checklist carefully to complete this form

Please provide all required information; without it we cannot process your claim request.

You must send a copy of your drivers license & social security card with this claim!

A. Claimant's Name and Current Address:

B. Original owner name as listed on Website or Letter:

Madison County
P.O. Box 608
Canton, MS 39046

Madison CTY Human Resource

Social Security Number/Tax I.D. 64-6000658

Daytime phone number 601-855-5530

C. If your name is different from the name shown in Section B, please explain why:

- Marriage/DivorceAttach a copy of filed papers
- Owner is deceased.....Your relationship to deceased _____
- Guardian, executor, administrator
- Other.....Please explain: Department under Madison County

Subscribed and sworn to before me this
1 Day of November, 2013

Cynthia A Parker Madison/MS
Notary Public, MISSISSIPPI County/State

My commission expires
12/11/2013, 20

Notary Public CYNTHIA A PARKER County/State

My commission expires _____

Affidavit: The named claimant hereby certifies that this claim for property presumed abandoned is valid and just, that all statements herein are true and correct, and that upon payment of this claim said claimant will indemnify and hold harmless the State, its officers and employees, from any other valid claims to the said property.

Signature(s) of ALL Claimants – **Must be Notarized**

Sharon Vance

*Due to heavy demands on our small staff,
please allow from 4 to 6 weeks for a response.*



State of Mississippi Treasury Department
P O Box 138 Jackson, MS 39205 Telephone 601-359-3534
www.treasury.ms.gov

LYNN FITCH
State Treasurer

Tony Geiger, Director
Unclaimed Property Division

Unclaimed Property Claim Form

PROPERTY ID # 1680936

Instructions: Read documentation checklist carefully to complete this form

Please provide all required information; without it we cannot process your claim request.

You must send a copy of your drivers license & social security card with this claim!

A. Claimant's Name and Current Address:

B. Original owner name as listed on Website or Letter:

Madison County
P.O. Box 608
Canton, MS 39046

Madison County

Social Security Number/Tax I.D. 64-6000658

Daytime phone number 601-855-5530

C. If your name is different from the name shown in Section B, please explain why:

- Marriage/DivorceAttach a copy of filed papers
- Owner is deceased.....Your relationship to deceased _____
- Guardian, executor, administrator
- Other.....Please explain: _____

Subscribed and sworn to before me this

1 Day of December, 2013

Cynthia A Parker Madison/MS
Notary Public County/State

My commission expires _____

Day of _____, 20____

Notary Public _____ County/State

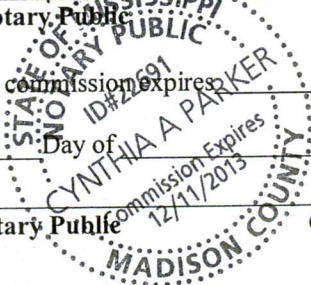
My commission expires _____

Affidavit: The named claimant hereby certifies that this claim for property presumed abandoned is valid and just, that all statements herein are true and correct, and that upon payment of this claim said claimant will indemnify and hold harmless the State, its officers and employees, from any other valid claims to the said property.

Signature(s) of ALL Claimants – **Must be Notarized**

Shelton Vance

*Due to heavy demands on our small staff,
please allow from 4 to 6 weeks for a response.*





State of Mississippi Treasury Department
P O Box 138 Jackson, MS 39205 Telephone 601-359-3534
www.treasury.ms.gov

LYNN FITCH
State Treasurer

Tony Geiger, Director
Unclaimed Property Division

Unclaimed Property Claim Form

PROPERTY ID # 2187558

Instructions: Read documentation checklist carefully to complete this form
Please provide all required information; without it we cannot process your claim request.

You must send a copy of your drivers license & social security card with this claim!

A. Claimant's Name and Current Address:

B. Original owner name as listed on Website or Letter:

Madison County
P.O. Box 608
Canton, MS 39046

Madison County

Social Security Number/Tax I.D. 64-6000658

Daytime phone number 601-855-5530

C. If your name is different from the name shown in Section B, please explain why:

- Marriage/DivorceAttach a copy of filed papers
- Owner is deceased.....Your relationship to deceased _____
- Guardian, executor, administrator
- Other.....Please explain: _____

Subscribed and sworn to before me this

1 Day of November, 2013

Cynthia A. Parker
Notary Public Madison County/State

My commission expires _____

Day of Commission Expires 12/11/2013, 20

Notary Public _____ County/State

My commission expires _____

Affidavit: The named claimant hereby certifies that this claim for property presumed abandoned is valid and just, that all statements herein are true and correct, and that upon payment of this claim said claimant will indemnify and hold harmless the State, its officers and employees, from any other valid claims to the said property.

Signature(s) of ALL Claimants – **Must be Notarized**

Sylvia James

*Due to heavy demands on our small staff,
please allow from 4 to 6 weeks for a response.*



State of Mississippi Treasury Department
P O Box 138 Jackson, MS 39205 Telephone 601-359-3534
www.treasury.ms.gov

LYNN FITCH
State Treasurer

Tony Geiger, Director
Unclaimed Property Division

Unclaimed Property Claim Form

PROPERTY ID # 1720173

Instructions: Read documentation checklist carefully to complete this form

Please provide all required information; without it we cannot process your claim request.

You must send a copy of your drivers license & social security card with this claim!

A. Claimant's Name and Current Address:

B. Original owner name as listed on Website or Letter:

Madison County
P.O. Box 608
Canton, MS 39046

Madison County Chancery

Social Security Number/Tax I.D. 64-6000658

Daytime phone number 601-855-5530

C. If your name is different from the name shown in Section B, please explain why:

- Marriage/DivorceAttach a copy of filed papers
- Owner is deceased.....Your relationship to deceased _____
- Guardian, executor, administrator
- Other.....Please explain: Department under Madison County

Subscribed and sworn to before me this

1 Day of November, 2013

Cynthia A. Parker Notary Public Madison County/State

My commission expires _____

Day of Commission Expires 12/11/2013 2013

Notary Public _____ County/State

My commission expires _____

Affidavit: The named claimant hereby certifies that this claim for property presumed abandoned is valid and just, that all statements herein are true and correct, and that upon payment of this claim said claimant will indemnify and hold harmless the State, its officers and employees, from any other valid claims to the said property.

Signature(s) of ALL Claimants – **Must be Notarized**

Eulita Tancer

*Due to heavy demands on our small staff,
please allow from 4 to 6 weeks for a response.*



State of Mississippi Treasury Department
P O Box 138 Jackson, MS 39205 Telephone 601-359-3534
www.treasury.ms.gov

LYNN FITCH
State Treasurer

Tony Geiger, Director
Unclaimed Property Division

Unclaimed Property Claim Form

PROPERTY ID # 2197683

Instructions: Read documentation checklist carefully to complete this form

Please provide all required information; without it we cannot process your claim request.

You must send a copy of your *drivers license & social security card with this claim!*

A. Claimant's Name and Current Address:

B. Original owner name as listed on Website or Letter:

Madison County
P.O. Box 608
Canton, MS 39046

Madison County Dept of Human

Social Security Number/Tax I.D. 64-6000658

Daytime phone number 601-855-5530

C. If your name is different from the name shown in Section B, please explain why:

- Marriage/DivorceAttach a copy of filed papers
- Owner is deceased.....Your relationship to deceased _____
- Guardian, executor, administrator
- Other.....Please explain: Department under Madison County

Subscribed and sworn to before me this

1 Day of November, 2013

Cynthia A. Parker Madison/MS
Notary Public County/State

My commission expires _____

Day of YNTHIA A PARKER, 2013

Notary Public 12/11/2013 County/State

My commission expires _____

Affidavit: The named claimant hereby certifies that this claim for property presumed abandoned is valid and just, that all statements herein are true and correct, and that upon payment of this claim said claimant will indemnify and hold harmless the State, its officers and employees, from any other valid claims to the said property.

Signature(s) of ALL Claimants – **Must be Notarized**

Shelton Vance

*Due to heavy demands on our small staff,
please allow from 4 to 6 weeks for a response.*



State of Mississippi Treasury Department
P O Box 138 Jackson, MS 39205 Telephone 601-359-3534
www.treasury.ms.gov

LYNN FITCH
State Treasurer

Tony Geiger, Director
Unclaimed Property Division

Unclaimed Property Claim Form

PROPERTY ID # 1577530

Instructions: Read documentation checklist carefully to complete this form

Please provide all required information; without it we cannot process your claim request.

You must send a copy of your drivers license & social security card with this claim!

A. Claimant's Name and Current Address:

**B. Original owner name as listed on
Website or Letter:**

Madison County

Madison County Justice Court

P.O. Box 608

Canton, MS 39046

Social Security Number/Tax I.D. 64-6000658

Daytime phone number 601-855-5530

C. If your name is different from the name shown in Section B, please explain why:

Marriage/DivorceAttach a copy of filed papers

Owner is deceased.....Your relationship to deceased _____

Guardian, executor, administrator

Other.....Please explain: Department under Madison County

Subscribed and sworn to before me this

1 Day of November, 2013

Cynthia A Parker Notary Public Madison County/State

My commission expires ID#22691

Day of CYNTHIA A PARKER 2013

Notary Public Commission Expires 12/11/2013 County/State

My commission expires _____

Affidavit: The named claimant hereby certifies that this claim for property presumed abandoned is valid and just, that all statements herein are true and correct, and that upon payment of this claim said claimant will indemnify and hold harmless the State, its officers and employees, from any other valid claims to the said property.

Signature(s) of ALL Claimants – **Must be Notarized**

Shelton Vance

**Due to heavy demands on our small staff,
please allow from 4 to 6 weeks for a response.**



State of Mississippi Treasury Department
P O Box 138 Jackson, MS 39205 Telephone 601-359-3534
www.treasury.ms.gov

LYNN FITCH
State Treasurer

Tony Geiger, Director
Unclaimed Property Division

Unclaimed Property Claim Form

PROPERTY ID # 1586494

Instructions: Read documentation checklist carefully to complete this form

Please provide all required information; without it we cannot process your claim request.

You must send a copy of your drivers license & social security card with this claim!

A. Claimant's Name and Current Address:

B. Original owner name as listed on Website or Letter:

Madison County
P.O. Box 608
Canton, MS 39046

Madison County Justice Court

Social Security Number/Tax I.D. 64-6000658

Daytime phone number 601-855-5530

C. If your name is different from the name shown in Section B, please explain why:

- Marriage/DivorceAttach a copy of filed papers
- Owner is deceased.....Your relationship to deceased _____
- Guardian, executor, administrator
- Other.....Please explain: Department under Madison County

Subscribed and sworn to before me this

1 Day of November, 2013

Cynthia A Parker Notary Public Madison County/State

My commission expires _____

Day of _____, 20____

Notary Public _____ County/State

My commission expires _____

Affidavit: The named claimant hereby certifies that this claim for property presumed abandoned is valid and just, that all statements herein are true and correct, and that upon payment of this claim said claimant will indemnify and hold harmless the State, its officers and employees, from any other valid claims to the said property.

Signature(s) of ALL Claimants – **Must be Notarized**

Guller Vance

*Due to heavy demands on our small staff,
please allow from 4 to 6 weeks for a response.*



State of Mississippi Treasury Department
P O Box 138 Jackson, MS 39205 Telephone 601-359-3534
www.treasury.ms.gov

LYNN FITCH
State Treasurer

Tony Geiger, Director
Unclaimed Property Division

Unclaimed Property Claim Form

PROPERTY ID # 1873638

Instructions: Read documentation checklist carefully to complete this form

Please provide all required information; without it we cannot process your claim request.

You must send a copy of your drivers license & social security card with this claim!

A. Claimant's Name and Current Address:

**B. Original owner name as listed on
Website or Letter:**

Madison County
P.O. Box 608
Canton, MS 39046

Madison County Justice Court

Social Security Number/Tax I.D. 64-6000658

Daytime phone number 601-855-5530

C. If your name is different from the name shown in Section B, please explain why:

- Marriage/DivorceAttach a copy of filed papers
- Owner is deceased.....Your relationship to deceased _____
- Guardian, executor, administrator
- Other.....Please explain: Department under Madison County

Subscribed and sworn to before me this

1 Day of November, 2013

Cynthia A. Parker
Notary Public Madison/MS
County/State

My commission expires _____

Day of _____, 20____

Notary Public _____ County/State

My commission expires _____

Affidavit: The named claimant hereby certifies that this claim for property presumed abandoned is valid and just, that all statements herein are true and correct, and that upon payment of this claim said claimant will indemnify and hold harmless the State, its officers and employees, from any other valid claims to the said property.

Signature(s) of ALL Claimants – **Must be Notarized**

Eulene Vance

**Due to heavy demands on our small staff,
please allow from 4 to 6 weeks for a response.**



State of Mississippi Treasury Department
P O Box 138 Jackson, MS 39205 Telephone 601-359-3534
www.treasury.ms.gov

LYNN FITCH
State Treasurer

Tony Geiger, Director
Unclaimed Property Division

Unclaimed Property Claim Form

PROPERTY ID # 1797697

Instructions: Read documentation checklist carefully to complete this form

Please provide all required information; without it we cannot process your claim request.

You must send a copy of your drivers license & social security card with this claim!

A. Claimant's Name and Current Address:

Madison County
P.O. Box 608
Canton, MS 39046

Social Security Number/Tax I.D. 64-6000658

Daytime phone number 601-855-5530

**B. Original owner name as listed on
Website or Letter:**

Madison County Justice Court

C. If your name is different from the name shown in Section B, please explain why:

- Marriage/DivorceAttach a copy of filed papers
- Owner is deceased.....Your relationship to deceased _____
- Guardian, executor, administrator
- Other.....Please explain: Department under Madison County

Subscribed and sworn to before me this

Day of November, 2013

Cynthia A Parker
Notary Public Madison County/State

My commission expires _____

Day of Commission Expires 12/11/2013, 20

Notary Public _____ County/State

My commission expires _____

Affidavit: The named claimant hereby certifies that this claim for property presumed abandoned is valid and just, that all statements herein are true and correct, and that upon payment of this claim said claimant will indemnify and hold harmless the State, its officers and employees, from any other valid claims to the said property.

Signature(s) of ALL Claimants – **Must be Notarized**

Emilia Vance

*Due to heavy demands on our small staff,
please allow from 4 to 6 weeks for a response.*



State of Mississippi Treasury Department
P O Box 138 Jackson, MS 39205 Telephone 601-359-3534
www.treasury.ms.gov

LYNN FITCH
State Treasurer

Tony Geiger, Director
Unclaimed Property Division

Unclaimed Property Claim Form

PROPERTY ID # 1570156

Instructions: Read documentation checklist carefully to complete this form

Please provide all required information; without it we cannot process your claim request.

You must send a copy of your drivers license & social security card with this claim!

A. Claimant's Name and Current Address:

B. Original owner name as listed on Website or Letter:

Madison County
P.O. Box 608
Canton, MS 39046

Madison County Tax Collector

Social Security Number/Tax I.D. 64-6000658

Daytime phone number 601-855-5530

C. If your name is different from the name shown in Section B, please explain why:

- Marriage/DivorceAttach a copy of filed papers
- Owner is deceased.....Your relationship to deceased _____
- Guardian, executor, administrator
- Other.....Please explain: Department under Madison County

Subscribed and sworn to before me this

1 Day of November, 2013
Cynthia A Parker, Madison/MS
Notary Public

Affidavit: The named claimant hereby certifies that this claim for property presumed abandoned is valid and just, that all statements herein are true and correct, and that upon payment of this claim said claimant will indemnify and hold harmless the State, its officers and employees, from any other valid claims to the said property.

My commission expires 12/11/2013

Signature(s) of ALL Claimants – **Must be Notarized**

Emilia Vance

Day of CYNTHIA A PARKER

Notary Public, Madison County/State

My commission expires _____

**Due to heavy demands on our small staff,
please allow from 4 to 6 weeks for a response.**



State of Mississippi Treasury Department
P O Box 138 Jackson, MS 39205 Telephone 601-359-3534
www.treasury.ms.gov

LYNN FITCH
State Treasurer

Tony Geiger, Director
Unclaimed Property Division

Unclaimed Property Claim Form

PROPERTY ID # 1954843

Instructions: Read documentation checklist carefully to complete this form

Please provide all required information; without it we cannot process your claim request.

You must send a copy of your drivers license & social security card with this claim!

A. Claimant's Name and Current Address:

B. Original owner name as listed on Website or Letter:

Madison County
P.O. Box 608
Canton, MS 39046

Madison County Tax Collector

Social Security Number/Tax I.D. 64-6000658

Daytime phone number 601-855-5530

C. If your name is different from the name shown in Section B, please explain why:

- Marriage/DivorceAttach a copy of filed papers
- Owner is deceased.....Your relationship to deceased _____
- Guardian, executor, administrator
- Other.....Please explain: Department under Madison County

Subscribed and sworn to before me this

1 Day of November, 2013

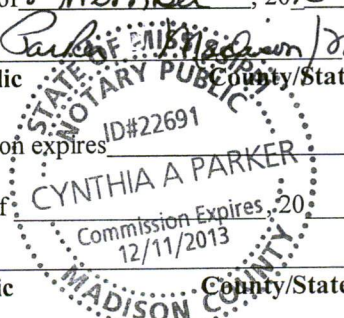
Cynthia A Parker
Notary Public _____
_____ County/State

My commission expires _____

Day of _____

Notary Public _____
_____ County/State

My commission expires _____



Affidavit: The named claimant hereby certifies that this claim for property presumed abandoned is valid and just, that all statements herein are true and correct, and that upon payment of this claim said claimant will indemnify and hold harmless the State, its officers and employees, from any other valid claims to the said property.

Signature(s) of ALL Claimants – **Must be Notarized**

Shutter Vance

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please allow from 4 to 6 weeks for a response.*



State of Mississippi Treasury Department
P O Box 138 Jackson, MS 39205 Telephone 601-359-3534
www.treasury.ms.gov

LYNN FITCH
State Treasurer

Tony Geiger, Director
Unclaimed Property Division

Unclaimed Property
Claim Form

PROPERTY ID # 2046029

Instructions: Read documentation checklist carefully to complete this form

Please provide all required information; without it we cannot process your claim request.

You must send a copy of your drivers license & social security card with this claim!

A. Claimant's Name and Current Address:

B. Original owner name as listed on
Website or Letter:

Madison County
P.O. Box 608
Canton, MS 39046

Madison County Tax Collector

Social Security Number/Tax I.D. 64-6000658

Daytime phone number 601-855-5530

C. If your name is different from the name shown in Section B, please explain why:

- Marriage/DivorceAttach a copy of filed papers
Owner is deceased.....Your relationship to deceased
Guardian, executor, administrator
X Other.....Please explain: Department under Madison County

Subscribed and sworn to before me this

1 Day of November, 2013

Cynthia A Parker, Notary Public, Madison County, MS

My commission expires 12/11/2013

Day of: CYNTHIA A PARKER

Notary Public, Madison County, State

My commission expires

Affidavit: The named claimant hereby certifies that this claim for property presumed abandoned is valid and just, that all statements herein are true and correct, and that upon payment of this claim said claimant will indemnify and hold harmless the State, its officers and employees, from any other valid claims to the said property.

Signature(s) of ALL Claimants - Must be Notarized

Shelton Vance

Due to heavy demands on our small staff,
please allow from 4 to 6 weeks for a response.



State of Mississippi Treasury Department
P O Box 138 Jackson, MS 39205 Telephone 601-359-3534
www.treasury.ms.gov

LYNN FITCH
State Treasurer

Tony Geiger, Director
Unclaimed Property Division

Unclaimed Property Claim Form

PROPERTY ID # 1396461

Instructions: Read documentation checklist carefully to complete this form

Please provide all required information; without it we cannot process your claim request.

You must send a copy of your drivers license & social security card with this claim!

A. Claimant's Name and Current Address:

B. Original owner name as listed on Website or Letter:

Madison County
P.O. Box 608
Canton, MS 39046
Social Security Number/Tax I.D. 64-6000658
Daytime phone number 601-855-5530

Madison CO Board of Supervisors

C. If your name is different from the name shown in Section B, please explain why:

- Marriage/DivorceAttach a copy of filed papers
- Owner is deceased.....Your relationship to deceased _____
- Guardian, executor, administrator
- Other.....Please explain: Department under Madison County

Subscribed and sworn to before me this

1 Day of November, 2013

Cynthia A Parker
Notary Public

My commission expires _____
ID#22691

Day of CYNTHIA A PARKER
Commission Expires 20
12/11/2013

Notary Public _____
MADISON COUNTY

My commission expires _____

Affidavit: The named claimant hereby certifies that this claim for property presumed abandoned is valid and just, that all statements herein are true and correct, and that upon payment of this claim said claimant will indemnify and hold harmless the State, its officers and employees, from any other valid claims to the said property.

Signature(s) of ALL Claimants – **Must be Notarized**

Shirley Vance

*Due to heavy demands on our small staff,
please allow from 4 to 6 weeks for a response.*



State of Mississippi Treasury Department
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www.treasury.ms.gov

LYNN FITCH
State Treasurer

Tony Geiger, Director
Unclaimed Property Division

Unclaimed Property Claim Form

PROPERTY ID # 2152539

Instructions: Read documentation checklist carefully to complete this form
Please provide all required information; without it we cannot process your claim request.

You must send a copy of your drivers license & social security card with this claim!

A. Claimant's Name and Current Address:

B. Original owner name as listed on Website or Letter:

Madison County
P.O. Box 608
Canton, MS 39046

Madison CO Tax Collector

Social Security Number/Tax I.D. 64-6000658

Daytime phone number 601-855-5530

C. If your name is different from the name shown in Section B, please explain why:

- Marriage/DivorceAttach a copy of filed papers
- Owner is deceased.....Your relationship to deceased _____
- Guardian, executor, administrator
- Other.....Please explain: Department under Madison County

Subscribed and sworn to before me this

1 Day of November, 2013

Cynthia A Parker, Madison, MS
Notary Public

My commission expires 12/11/2013

Day of November, 2013

Notary Public, Madison County/State

My commission expires _____

Affidavit: The named claimant hereby certifies that this claim for property presumed abandoned is valid and just, that all statements herein are true and correct, and that upon payment of this claim said claimant will indemnify and hold harmless the State, its officers and employees, from any other valid claims to the said property.

Signature(s) of ALL Claimants – **Must be Notarized**

Guelton Vance

*Due to heavy demands on our small staff,
please allow from 4 to 6 weeks for a response.*



State of Mississippi Treasury Department
P O Box 138 Jackson, MS 39205 Telephone 601-359-3534
www.treasury.ms.gov

LYNN FITCH
State Treasurer

Tony Geiger, Director
Unclaimed Property Division

Unclaimed Property Claim Form

PROPERTY ID # 1311119

Instructions: Read documentation checklist carefully to complete this form

Please provide all required information; without it we cannot process your claim request.

You must send a copy of your drivers license & social security card with this claim!

A. Claimant's Name and Current Address:

B. Original owner name as listed on Website or Letter:

Madison County
P.O. Box 608
Canton, MS 39046

Madison CO Tax Collector

Social Security Number/Tax I.D. 64-6000658

Daytime phone number 601-855-5530

C. If your name is different from the name shown in Section B, please explain why:

- Marriage/DivorceAttach a copy of filed papers
- Owner is deceased.....Your relationship to deceased _____
- Guardian, executor, administrator
- Other.....Please explain: Department under Madison County

Subscribed and sworn to before me this

1 Day of November, 2013

Cynthia A Parker
Notary Public

My commission expires ID#22691

Day of CYNTHIA A PARKER

Notary Public Commission Expires 12/11/2013
County/State

My commission expires _____

Affidavit: The named claimant hereby certifies that this claim for property presumed abandoned is valid and just, that all statements herein are true and correct, and that upon payment of this claim said claimant will indemnify and hold harmless the State, its officers and employees, from any other valid claims to the said property.

Signature(s) of ALL Claimants – **Must be Notarized**

Shelton Vance

**Due to heavy demands on our small staff,
please allow from 4 to 6 weeks for a response.**



State of Mississippi Treasury Department
P O Box 138 Jackson, MS 39205 Telephone 601-359-3534
www.treasury.ms.gov

LYNN FITCH
State Treasurer

Tony Geiger, Director
Unclaimed Property Division

Unclaimed Property Claim Form

PROPERTY ID # 1631187

Instructions: Read documentation checklist carefully to complete this form

Please provide all required information; without it we cannot process your claim request.

You must send a copy of your drivers license & social security card with this claim!

A. Claimant's Name and Current Address:

**B. Original owner name as listed on
Website or Letter:**

Madison County
P.O. Box 608
Canton, MS 39046

Madison County MS Trustee

Social Security Number/Tax I.D. 64-6000658

Daytime phone number 601-855-5530

C. If your name is different from the name shown in Section B, please explain why:

- Marriage/DivorceAttach a copy of filed papers
- Owner is deceased.....Your relationship to deceased _____
- Guardian, executor, administrator
- Other.....Please explain: Under Madison County

Subscribed and sworn to before me this
1 Day of November, 2013
Cynthia A Parker Madison MS
Notary Public County/State

My commission expires _____
Day of _____, 20____
Notary Public _____
Commission Expires _____
County/State _____



Affidavit: The named claimant hereby certifies that this claim for property presumed abandoned is valid and just, that all statements herein are true and correct, and that upon payment of this claim said claimant will indemnify and hold harmless the State, its officers and employees, from any other valid claims to the said property.

Signature(s) of ALL Claimants – **Must be Notarized**

Gulker Jones

**Due to heavy demands on our small staff,
please allow from 4 to 6 weeks for a response.**



State of Mississippi Treasury Department
P O Box 138 Jackson, MS 39205 Telephone 601-359-3534
www.treasury.ms.gov

LYNN FITCH
State Treasurer

Tony Geiger, Director
Unclaimed Property Division

Unclaimed Property Claim Form

PROPERTY ID # 2042774

Instructions: Read documentation checklist carefully to complete this form

Please provide all required information; without it we cannot process your claim request.

You must send a copy of your drivers license & social security card with this claim!

A. Claimant's Name and Current Address:

**B. Original owner name as listed on
Website or Letter:**

Madison County
P.O. Box 608
Canton, MS 39046

County Madison

Social Security Number/Tax I.D. 64-6000658

Daytime phone number 601-855-5530

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- Other.....Please explain: _____

Subscribed and sworn to before me this

1 Day of November, 2013

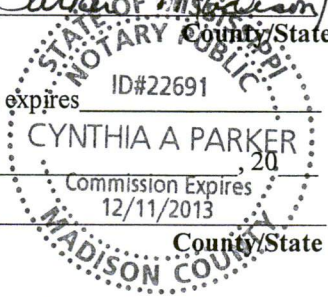
Cynthia A Parker
Notary Public

My commission expires ID#22691

Day of CYNTHIA A PARKER

Notary Public Madison County State

My commission expires _____



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