

**IN THE UNITED STATES DISTRICT COURT
FOR THE WESTERN DISTRICT OF PENNSYLVANIA**

Plaintiff(s)

v.

Defendant

Case No. _____

APPLICATION FOR PAYMENT OF UNCLAIMED FUNDS

1. I am making application to receive \$ ENTER AMOUNT, which was deposited as unclaimed funds on behalf of:

2. Applicant is entitled to receive the requested funds, has made sufficient inquiry and has no knowledge that any other party may be entitled to, and is not aware of any dispute regarding the funds at issued based upon the following (check all statement(s) that apply):

- ☐ Applicant is the owner of record named in paragraph 1, and the owner of the funds appearing on the records of this Court, as evidenced by the attached documents.
- ☐ Applicant is the successor business for the owner of record named in paragraph 1, with authority to receive such funds, or who is authorized by the attached notarized, original Power of Attorney to file this application on behalf of the successor business and documents establishing chain of ownership and/or assignment.
- ☐ Applicant is the successor claimant for the owner of record named in paragraph 1 as evidenced by the attached documents establishing transfer of ownership and/or assignment.
- ☐ Applicant is an administrator, executor or representative of the deceased owner of record named in paragraph 1, as evidenced by the attached certified copies of the death certificate and other appropriate probate documents substantiating applicant's right to act on behalf of the decedent's estate.

Applicant is the representative (i.e., funds locator) of the owner of record named in paragraph 1, as evidenced by the attached notarized, original Power of Attorney on whose behalf the representative is acting.

- ☐ None of the above applies. As evidenced by the attached documents, applicant is entitled to these unclaimed funds because:

I declare under penalty of perjury under the laws of the United States of America that the foregoing statements and information are true and correct.

Date

Name of Applicant

Signature

Address of Applicant

Phone Number of Applicant