

**West Virginia State Treasurer's Office – Unclaimed Property
Unclaimed Property Estate Claim Declaration**

State of _____
County of _____

I, _____, first being duly sworn, under penalty of perjury, hereby state as follows:

1. That I am claiming property in the name of _____ (the "Reported Owner").
2. That _____ (Reported Owner's name), died on _____ (date of death), in _____ (place of death), as shown on a copy of the Reported Owner's death certificate attached to this declaration.
3. That no person is currently qualified as administrator over the reported owner's estate.
4. That: **(circle one)**
 - a. the Reported Owner left no will, **OR**
 - b. that a copy of the Reported Owner's **final** will is attached.
5. That I have exercised due diligence to determine whether there are any outstanding debts of the Reported Owner's estate, and to the best of my knowledge there are none.
6. That my relationship to the Reported Owner is that of _____, and that the attached Table of Heirship is true and correct to the best of my knowledge and belief.
7. That no other person has a superior right to the property I am claiming.
8. That: **(circle one)**
 - a. each of the Reported Owner's remaining heirs has signed a limited power of attorney, authorizing me to collect the property on his or her behalf, and attached to this document, **OR**
 - b. that I am claiming only my share of the Reported Owner's property.
9. That all the information on this form and the attachments is true and complete; that I will only accept payment of property to which I am entitled under the West Virginia Unclaimed Property Act; that if claiming the property for others as indicated above, I will distribute the property to the heirs entitled to it; that I will immediately return any property to which I become aware that I am not entitled; and that I will indemnify and hold harmless the Unclaimed Property Division, the State Treasurer's Office, their officers and employees, and the State of West Virginia against any loss resulting from payment of this property to me.

Claimant Signature: _____ Date _____

Subscribed and sworn before me this _____ (date)

by _____

My commission expires _____

Notary Public

Notary Stamp

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TABLE OF HEIRSHIP FOR: _____ (“DECEASED OWNER”)

Deceased Owner's Date of Death: _____

COMPLETE THIS FORM IF YOU ARE CLAIMING AS AN HEIR. LIST ALL THE HEIRS, EVEN IF YOU ARE THE ONLY HEIR CLAIMING PROPERTY.

	First and last name	Date of birth	Date of death
1. Spouse, if alive at owner's death			
2. List all children whether living or deceased			
3. Children of deceased individuals listed in Box 2 above	1.		
	Child of:		
	2.		
	Child of:		
	3.		
	Child of:		
	4.		
	Child of:		
		Relationship	Date of Death
4. If all above boxes are blank, list other closest relatives			