

**ARIZONA FORM
650D**

**Arizona Department of Revenue • Unclaimed Property Section
NEGATIVE REPORT OF ABANDONED PROPERTY**

DATE STAMP

1

Entity Name (Holder)		
Federal ID Number	State / Date of Incorporation	
Period Covered		
Prior Name (if Entity Name has changed)	Previous Holder	
Holder Contact (for use by Unclaimed Property staff)		
Name		
Direct Telephone Number		
E-mail Address		
Mailing Address		
City	State	ZIP code

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The undersigned declares under penalty of perjury, that to the best of his/her knowledge and belief, the above named entity has no property which would be presumed abandoned under the Arizona Uniform Unclaimed Property Act for the period covered as stated and that he/she is duly authorized to execute this report.

Print Name _____

Signature _____

Date _____

**MAIL TO:
Arizona Department of Revenue
Unclaimed Property Unit
P.O. Box 29026
Phoenix, AZ 85038-9026**

**For assistance in the Phoenix area: (602) 364-0380 or outside the Phoenix area toll free: (877) 492-9957
To speak to the reporting specialist: (602) 716-6031
<https://azdor.gov/unclaimed-property> • Email: ReportingUnclaimedProperty@azdor.gov**