

UNCLAIMED PROPERTY CAPITAL CREDITS FOR COUNTIES

County Request for Capital Credits

County Name _____ County FEIN _____

Authorized by Judge Commissioners Court

Name of County Judge _____ Approved Date _____

Send the requested funds to:

Address _____ City _____ State _____ Zip _____

**I acknowledge that the purpose of the funds complies with provisions of
Texas Local Government Code, Section 381.004.**

Name (printed) _____ Title _____

Signature _____ Date _____

Email Address _____ Phone _____

Submit signed and completed form by either mail, email or fax by July 31, 2020.

Mail Texas Comptroller of Public Accounts
Unclaimed Property Division
Holder Education and Reporting section
P.O. Box 12019
Austin, Texas 78711-2019

Email up.holder@cpa.texas.gov
Fax 512-463-3569

FOR COMPTROLLER'S USE ONLY: We are authorized to release ____% of the total amount available to your county. We will send a \$_____ payment to the address provided above. By requesting funds, you have certified that they will be used in compliance with the provisions of Texas Local Government Code, Section 381.004.

Comptroller's Representative _____ Date _____

This publication is intended as a general guide and not as a comprehensive resource on the subjects covered.
It is not a substitute for legal advice.

In compliance with the Americans with Disabilities Act, this document may be requested in alternative formats by calling **800-252-1382**,
or by sending a fax to **512-475-0900**.