

For BPD use only:

Customer Name

Customer No.

PD F 2517 E  
Department of the Treasury  
Bureau of the Public Debt  
(Revised October 2007)

## APPLICATION FOR RELIEF DUE TO THE LOSS, THEFT OR DESTRUCTION OF PAID UNITED STATES SAVINGS BONDS/NOTES

Read the instructions on page 2 before completing this form.  
**TYPE OR PRINT ALL INFORMATION**

The undersigned hereby affirms that the following-described paid United States Savings Bonds/Notes have disappeared as stated and that the information given is true so far as is known and ascertainable.

**(A) Description of bonds:**

| <b>Serial Number</b><br>(With denominational prefix<br>and letter suffix) | <b>Issue Date</b><br>(Month and Year) | <b>Amount Paid</b> | <b>Date Paid</b><br>(Month, day and<br>year) | <b>Registration</b><br>(Social security number, names, including middle<br>names or initials and connecting words,<br>exactly as inscribed on the bonds) |
|---|---------------------------------------|--------------------|--|--|
|   |                                       |                    |  |  |
|   |                                       |                    |  |  |
|   |                                       |                    |  |  |
|   |                                       |                    |  |  |
|   |                                       |                    |  |  |
|   |                                       |                    |  |  |
|   |                                       |                    |  |  |
|   |                                       |                    |  |  |
|   |                                       |                    |  |  |
|   |                                       |                    |  |  |
|   |                                       |                    |  |  |
|   |                                       |                    |  |  |
|   |                                       |                    |  |  |

**(B)** Were the bonds presented for redemption?  Yes  No

Were the bonds stamped "Paid"?  Yes  No

**(C)** State the reason(s) a film record of the bonds is not available:

**(D)** Following is a statement of the circumstances surrounding the disappearance of and search for the bonds:

- (E) The undersigned petitions the Department of the Treasury for relief and agrees that, if the bonds should come into its possession, they will be surrendered to the Department, through the Pittsburgh Branch, Federal Reserve Bank of Cleveland, Attn: EZ Clear Adjustments, as the property of the United States. (Submit Retirement Plan and/or Individual Retirement Bonds to the address shown at the bottom of this page.) Further, the undersigned understands and agrees that relief granted pursuant to this claim is based on evidence presently available and does not constitute relief under 31 USC 3126.

Agent Code: \_\_\_\_\_

Date: \_\_\_\_\_

\_\_\_\_\_  
(Name of Paying Agent)

\_\_\_\_\_  
(Address – Number and Street or Rural Route, City, State, and ZIP Code)

By: { \_\_\_\_\_  
(Signature and Title of an Authorized Officer)  
\_\_\_\_\_  
(Printed Name and Title)

\_\_\_\_\_  
(Telephone Number)

#### INSTRUCTIONS TO PAYING AGENTS

**"BONDS" AS REFERRED TO BELOW INCLUDES SAVINGS NOTES WHEN APPROPRIATE.**

- ITEM (A)** A complete description of the bonds must be furnished. If more space is needed, use a separate sheet of paper, identify it as "Item A", and reference the attachment in Item A of the application. State "not available" in second and fifth columns if information required by those columns is not available.
- ITEM (B)** If the bonds were not stamped PAID, ask the Federal Reserve Bank for instructions regarding (1) an additional agreement by the paying agent and (2) affidavits or certified statements from the bond owners. If such documents are required, they must be attached to the application.
- ITEM (C)** Provide a statement why film records of the bonds are not available.
- ITEM (D)** Please give a brief but complete account of the known circumstances surrounding the disappearance of the bonds and the search made to find them, including a search of the office equipment used in processing the bonds. Employees known to have handled the bonds must be questioned and the results of such questioning shown. Specify whether or not the bonds were handled in accordance with prescribed procedure. If more space is needed, use a separate sheet of paper, identify it as "Item D", and make reference to the attachment in Item D of the application.
- ITEM (E)** The application must be signed by an authorized officer having authority to bind the financial institution, such as a president, vice president, or cashier. If an authorized officer, as referred to herein, is not available at a branch, the application for relief must be submitted through the main office of the financial institution so that an authorized officer may sign as required.

**When the form is completed and duly signed, forward the original and all necessary attachments to:**

**Department of the Treasury  
Bureau of the Public Debt  
PO Box 7012  
Parkersburg, WV 26106-7012**