



# UNCLAIMED PROPERTY HOLDERS PAYOR INFORMATION FORM

New   
Change  effective with next payment due \_\_\_\_ / \_\_\_\_ / \_\_\_\_

HOLDER NAME: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

\_\_\_\_\_

FEDERAL ID #: \_\_\_\_\_

CATEGORY OF PAYMENT: UNCLAIMED PROPERTY

CONTACT: \_\_\_\_\_

TITLE: \_\_\_\_\_

PHONE #: ( \_\_\_\_\_ ) \_\_\_\_\_ ext. \_\_\_\_\_ FAX: \_\_\_\_\_

**ELECTRONIC FUNDS TRANSFER INFORMATION (Please indicate your preference by checking one of the boxes below):**

ACH Credit with Addenda

ACH Debit  If checked, please provide additional information below:

BANK NAME: \_\_\_\_\_

CITY/STATE: \_\_\_\_\_

TRANSIT/ROUTING NUMBER: \_\_\_\_\_

BANK ACCOUNT NUMBER: \_\_\_\_\_

I hereby authorize the Texas Comptroller of Public Accounts to initiate ACH Debit entries to the financial institution account indicated above for payments owed to the state of Texas. Amounts shall correspond to payment information entered into the TEXNET System for the applicable period. This authorization is to remain in full force and effect until the Comptroller receives written notification from me of termination and has a reasonable opportunity to act on it.

Name: \_\_\_\_\_

Signature: \_\_\_\_\_

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

**PLEASE COMPLETE AND RETURN THIS FORM TO:**

COMPTROLLER OF PUBLIC ACCOUNTS

CASH MANAGEMENT PROGRAMS

P.O.BOX 12608

AUSTIN, TX 78711

**PHONE: (800) 531-5441, EXTENSION 33010 OR FAX: (512) 463-1364**

*Under Ch. 559, Government Code, you are entitled to review, request, and correct information we have on file about you, with limited exceptions in accordance with Ch. 552, Government Code. To request information for review or to request error correction, contact us at the address or toll-free number listed on this form.*