NORTH CAROLINA
DEPARTMENT OF STATE TREASURER
UNCLAIMED PROPERTY DIVISION

BRADFORD B. BRINER
STATE TREASURER

MARYANNE FITZPATRICK
DEPUTY TREASURER

Voluntary Disclosure Program Request Form

Form should be completed for the business entity (Holder) requesting participation in North Carolina's Voluntary Disclosure Program (VDP). Unless explained otherwise, 'Holder' participating in the VDP should be the Parent Entity, as well as, any Subsidiaries or Divisions.

1. HOLDER INFORMATION

Holder Name: _____

Holder ID *(if known)*: _____ FIN: _____

Address: _____

City: _____ State: _____ Zip: _____

Contact: _____ Phone: (_____) _____

Title: _____ State of Incorporation: _____

Email: _____ Date of Incorporation: _____

If applicable, please provide Organizational Chart showing Parent Entity, as well as, Subsidiaries and/or Divisions, along with FIN for each if different than Parent.

2. HOLDER QUESTIONS

a. Is the Holder currently under audit by a member of the UPD Compliance and Audit Team or by one of the UPD Vendor Auditors? **Yes** ☐ **No** ☐

b. Has the Holder been notified by a member of the UPD Compliance and Audit Team or by one of the UPD Vendor Auditors that they will be audited? **Yes** ☐ **No** ☐

c. Has the Holder participated in North Carolina's VDP in the past? **Yes** ☐ **No** ☐

3. REASON(S) FOR VDP REQUEST (CHECK ALL THAT APPLY)

☐ First Time Remitter To North Carolina
☐ Audited By A Statutory Authority And Past Due Property Was Identified
☐ Past Due Property Not Included On Prior Year Filings Due To Clerical Error
☐ Reports Were Not Filed For Years Past Due Property Was Identified
☐ Ceased Or In The Process Of Ceasing Operations
☐ Other: _____

Provide narrative as to why past due property was not previously reported to UPD:

_____

_____

_____

_____

4. REPORT INFORMATION

If known, please provide:

Estimated or total amount of past due property to be reported: $ _____

Estimated number of items to be reported: _____

Last Transaction Date for oldest property to be reported: _____

5. PROPERTY TYPE

Brief description of the type(s) of property to be reported.

_____

6. REQUIRED HOLDER DOCUMENTARY EVIDENCE

Statutory Authority Audit - A Holder requesting entry into the VDP due to an audit by a statutory authority, such as State Bar Association, Insurance Commission, or Government agency, or who has undergone any other external independent audit, must provide a copy of the official audit engagement letter and/or audit findings related to unclaimed property.

Ceased or in the Process of Ceasing Operations. - A Holder who has terminated, or who is terminating business operations, must provide an official document(s) indicating such.

7. CONTACT

Holder contact regarding unclaimed property, if different than contact listed in Section 1:

Name: _____ Title: _____

Email: _____ Phone Number: _____

8. HOLDER AUTHORIZATION OF THIRD PARTY, IF APPLICABLE

☐ *Check here if Holder is using a Third Party and authorizes them to communicate on Holder's behalf regarding all matters related to this VDP request.*

Third Party (Advocate, CPA firm, etc.) contact:

Business Name: _____

Contact Name: _____ Title: _____

Email: _____ Phone Number: _____

9. SIGNATURE

Holder Contact listed in Section 1:

Signature: _____ Date: _____

Completed form and required documents, if applicable, should be emailed to
VoluntaryDisclosureProgram@nctreasurer.gov

If you have any questions, please call 919-814-4200, Option 3, or send email to address above.