



Unclaimed Property Designation of Representative Form

You may mail this completed form to:

Direct Overnight Mail:

Ares Wealth Management Solutions
c/o SS&C GIDS, Inc.
430 West 7th Street, Suite 219079
Kansas City, MO 64105

P.O. Box:

Ares Wealth Management Solutions
c/o SS&C GIDS, Inc.
P.O. Box 219079
Kansas City, MO 64121-9079



SEPTEMBER 2017

Unclaimed Property Designation of Representative

Glenn Hegar

Texas Comptroller of
Public Accounts

Written notice by Holder of Unclaimed Property

Texas Property Code, Title 6, Section 74.1011 requires businesses, financial institutions and other holders of unclaimed property to mail a written notice to the last known address of known owners of property to inform them that, due to inactivity, their accounts may be delivered to the Comptroller.

Effective Sept. 1, 2017

Effective Sept. 1, 2017, Texas Property Code, Title 6, sections 72.1021 and 73.103 allow the owners of financial accounts, mutual funds or contents of a safe deposit box to designate representatives for their accounts, for the purpose of receiving the notice required in Section 74.1011.

Designating a Representative

The owner of the account(s) may designate the name and a mailing or email address of a representative of the owner only for the purpose of receiving the notice required in Section 74.1011.

The owner is not required to designate a representative. The designated representative does not have any rights to the account or safe deposit box and may not access the account or safe deposit box.

To designate a representative to receive notices for your account(s), please complete the **Designation of Representative for Notice Request** located on the back of this form.

THIS FORM IS TO BE
MAINTAINED ON FILE WITH
THE ACCOUNT OWNER'S
BANK OR FINANCIAL
INSTITUTION

DO NOT SUBMIT WITH
THE HOLDER'S UNCLAIMED
PROPERTY REPORT

FOR INFORMATION ON
UNCLAIMED PROPERTY, SEE
comptroller.texas.gov/up.

DESIGNATION OF REPRESENTATIVE FOR NOTICE REQUEST

SECTION A: DESIGNATED REPRESENTATIVE INFORMATION (PLEASE PRINT)

Representative Name _____

Address _____

City, State, ZIP Code _____

Phone (area code and number) _____

Email address _____

SECTION B: ACCOUNT OWNER INFORMATION (PLEASE PRINT)

Account Owner's Name _____

Owner's Social Security Number _____

OWNER'S ACCOUNT NUMBER(S)

Select account types and include the account numbers:

☐ All accounts at this institution (indicate account numbers below)

☐ Checking Account _____

☐ Savings Account _____

☐ Matured Certificates of Deposit _____

☐ Escrow Account _____

☐ Safety Deposit Box/Safekeeping _____

☐ Mutual Fund _____

☐ IRA _____

☐ Other _____
Account Type Account Number

**sign
here** ➡

Owner's Signature _____

Date _____

This form is to be maintained on file with the account owner's bank or financial institution for a time period determined by that institution.
This form should not be submitted with the holder's unclaimed property report.

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**.