For official use only:	
Customer Name	Case No.

FS Form 1025 Department of the Treasury Bureau of the Fiscal Service (Revised March 2018)

## CLAIM FOR LOST, STOLEN, OR DESTROYED UNITED STATES REGISTERED SECURITIES

OMB No. 1530-0029

stateme	ANT: Follow instructions in fill nt to the United States is a crim	e that is punishable by fine a	ld be aware that the and/or imprisonmen YPE ALL INFORMATI		
1. Des	cribe the securities in the s		THE FILE IN GRAIN, I	<del></del>	
	TITLE OF SECURITY entify by interest rate, title, call and maturity dates)	SERIAL NUMBER	FACE AMOUNT	REGISTRATION (Exact inscription on each security)	
	(If you need m	ore space to describe your s	securities, use the co	entinuation sheet on page 3.)	
TAXPA	YER IDENTIFYING NUMBER:	- Social Security No		(Employer Identification Number)	
•	ou the present lawful owner are not the owner, in what ca	_	own right? Yes	No No	
	the securities ever assigned s, to whom? (Give name, add		d in any manner?	Yes No	
4 14/	41				
4. vvere	the securities:  Lost? Yes No  Stolen? Yes No	- -			
	Date of theft:	_			
	Was a police rep	ort filed? Yes No	If Yes, atta	ch a copy of the report.	
•	Destroyed? Yes No		ning pieces with t	his form.)	
•	Who had the securities last,				
•	Who had access to the secu	.iti0			
•	Where were the securities la				
•	When were the securities las	-			
•	Were any identification documents also lost or stolen? Yes No				
•	If <b>Yes</b> , please list them.	nents also lost of stoler:	10010		
•	Have you received reimburse	or firm making reimburser		If <b>Yes,</b> please explain fully, and include the name of the reimbursement, and the details of any cour	
				_	
-	What have you done to reco				

Tell us the names of any other persons having knowledge of the loss.

<ul> <li>What is your I</li> </ul>	egal capacity?				
Are you court-	-appointed? Yes	No			
6. If a minor is named	on the securities:				
<ul> <li>What is his/he</li> </ul>	er age?	• What	is his/her social security n	number?	
<ul> <li>What is your r</li> </ul>	relationship to the minor?				
original securities be the original securities and severally: (1) to United States harmle demand by the Dep Treasury all sums of administrative costs of any information of interest in these security.	nalty of perjury and sever	United States. d bind ourselves securities to the ny other parties to indemnify undent may pay duher liability or los regarding the sally affirm and sa	Upon the granting of relies, our heirs, executors, as Department of the Treathaving, or claiming to have conditionally the United Sue to the redemption of the ses incurred as a result of ecurities described to an any that the securities describes described to an any that the securities described to an any that the securities described to any	ef, we assign all our right dministrators, successors asury if they are recoverye, interests in these sections and to repay to the dese original securities, in the redemption. We cany party having an owner.	, title, and interest in s and assigns, jointly red; (2) to hold the curities; and (3) upon the Department of the acluding any interest, consent to the release ership or entitlement
destroyed and that th	ne information given is tru	e to the best of o	ur knowledge and belief.		
You	ı must wait until you a	re in the pres	ence of a certifying of	fficer to sign this form	n.
Sign here:	(Signature)		Sign here:		
	(Signature)			(Signature)	
(Number and Street or Rural Route)		(Number and Street or Rural Route)			
(City)	(State)	(ZIP Code)	- (City)		(ZIP Code)
(Social Security Number	er) OR (Employer Ident	ification Number)	(Social Security No	umber) OR (Employer	Identification Number)
(Daytime Telephone Number)		(Daytime Telephone Number)			
(E-Mail Address)			(E-Mail Address)		
Certifying Officer	– The individuals must s	sign in your pre	sence. Complete the ce	ertification and affix you	ır stamp or seal.
I CERTIFY that			I CERTIFY that		
•	wn or was proven to me			nown or was proven to	
	day of			this day of	
, at (Year)	(City)	(State)	(Year)	(City)	(State)
and signed this form.			and signed this form.		
_	(Signature of Certifying	g Officer)		(Signature of Cert	ifying Officer)
(OFFICIAL STAMP			(OFFICIAL STAMP		
OR SEAL)	(Title of Certifying Officer)		OR SEAL)	(Title of Certify	ing Officer)
_	(Address)			(Addre	ss)

5. If you have been appointed legal representative (see Item 5 in the Instructions):

Continuation of description of securities in Item 1:

TITLE OF SECURITY (Identify by interest rate, title, call and maturity dates)	SERIAL NUMBER	FACE AMOUNT	REGISTRATION (Exact inscription on each security)
and maturity dates)			

(If you need more space to describe your securities, use a continuation sheet and attach it to the form.)

## **INSTRUCTIONS**

USE OF FORM - Do not use this form for United States Savings Bonds, Retirement Plan Bonds, or Individual Retirement Bonds.

Use this form to apply for relief on account of loss, theft, or destruction of United States registered securities and registered securities for which the Treasury Department acts as transfer agent. A bond of indemnity will ordinarily be required for transferable securities but only on a form that will be provided, when necessary. The Secretary of the Treasury reserves the right to require additional evidence in any particular case.

**COMPLETION OF FORM** – Print clearly in ink or type all information requested. If more space is needed for any item, use a continuation sheet of paper and attach it to this form.

- **ITEM 1.** Describe the securities. Provide as much information as possible. Show the owner's social security number or the employer identification number, if one has been assigned.
- Tell us if you are the owner of the securities by marking the appropriate box. If you are not the owner, tell us the capacity in which you are acting. If you have been appointed legal representative, see Item 5 for further information and/or evidence required to support your application.
- **ITEM 3.** Tell us if the securities have ever been assigned, endorsed, or transferred by marking the appropriate box. If so, furnish the name, address, and any other details regarding the person to whom the securities were assigned, endorsed, or transferred.
- **ITEM 4.** Check each box that applies. Provide complete details regarding the loss, theft, or destruction of the securities. If another person had possession of the securities or knowledge of the circumstances of the loss, that person must provide a separate statement explaining the circumstances.
- **ITEM 5.** If you were appointed as legal representative because:
  - the owner is deceased (with no surviving coowner or beneficiary named on the securities), or
  - the owner or coowner is a minor, or
  - the owner or coowner is incapacitated,

complete the form and submit a court certificate or certified copy of your letters of appointment, under court seal, showing the appointment is still in full force.

- If your name and official capacity are shown in the registration of the securities, evidence of your appointment is **not** necessary.
- If no legal representative has been appointed for a deceased or incompetent owner, advise the Bureau of the Fiscal Service and additional instructions will be provided.
- **ITEM 6.** If a minor is named on the securities, show the minor's age and social security number, and tell us your relationship to the minor.
- **ITEM 7.** Sign the form in ink, print your name, and provide your address, daytime telephone number, and e-mail address, if applicable. Your signature must be certified (see **CERTIFICATION** below).

**CERTIFICATION** – You must appear before and establish identification to the satisfaction of an authorized certifying officer or other officer authorized by law to administer oaths and sign the form in the presence of the officer. The certifying officer must complete the certification forms provided and affix the seal or stamp used when certifying requests for payment. Authorized certifying officers are available at financial institutions, including credit unions, in the United States. For a complete list of such officers, see Department of the Treasury Circular No. 300, current revision, 31 CFR 306.

**WHERE TO SEND –** Send the completed form, and any additional information or evidence, to Treasury Retail Securities Site, PO Box 9150, Minneapolis, MN 55480-9150.

## NOTICE UNDER THE PRIVACY AND PAPERWORK REDUCTION ACTS

The collection of the information you are requested to provide on this form is authorized by 31 U.S.C. CH. 31 relating to the public debt of the United States. The furnishing of a social security number, if requested, is also required by Section 6109 of the Internal Revenue Code (26 U.S.C. 6109).

The purpose of requesting the information is to enable the Bureau of the Fiscal Service and its agents to issue securities, process transactions, make payments, identify owners and their accounts, and provide reports to the Internal Revenue Service. Furnishing the information is voluntary; however, without the information, the Fiscal Service may be unable to process transactions.

Information concerning securities holdings and transactions is considered confidential under Treasury regulations (31 CFR, Part 323) and the Privacy Act. This information may be disclosed to a law enforcement agency for investigation purposes; courts and counsel for litigation purposes; others entitled to distribution or payment; agents and contractors to administer the public debt; agencies or entities for debt collection or to obtain current addresses for payment; agencies through approved computer matches; Congressional offices in response to an inquiry by the individual to whom the record pertains; as otherwise authorized by law or regulation.

We estimate it will take you about 55 minutes to complete this form. However, you are not required to provide information requested unless a valid OMB control number is displayed on the form. Any comments or suggestions regarding this form should be sent to the Bureau of the Fiscal Service, Forms Management Officer, Parkersburg, WV 26106-1328. **DO NOT SEND completed form to the above address; send to the correct address shown in "WHERE TO SEND" in the Instructions.**