For official use only:	
Customer Name	Case No.

FS Form 1025 Department of the Treasury Bureau of the Fiscal Service (Revised November 2023)

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

IMPORTANT: Follow instructions in filling out this form. You should be aware that the making of any false, fictitious, or fraudulent claim or statement to the United States is a crime that is punishable by fine and/or imprisonment.

TITLE OF SECURITY	050141 111111050	54.05 AMOUNT	REGISTRATION
(Identify by interest rate, title, call and maturity dates)	SERIAL NUMBER	FACE AMOUNT	(Exact inscription on each security)
(If you need n	: nore space to describe you	r securities, use the contir	nuation sheet on page 3.)
TAXPAYER IDENTIFYING NUMBER:	- Social Security	Number) OR	(Employer Identification Number)
A		, viuluta Vaa	
Are you the present lawful owne If you are not the owner, in what c		ur own right? Yes	No.
in you are not the owner, in what o	apaony are you doming.		
Word the socurities over assigned	od andaread ar transfa	rrad in any mannar? V	es No
Were the securities ever assigned If Yes, to whom? (Give name, add		rred in any manner? Te	S NO
in res, to whom? (Give hame, aud	uress, and other details.)		
Were the securities:			
Were the securities:  • Lost? Yes No			
• Lost? Yes No			
<ul><li>Lost? Yes No</li><li>Stolen? Yes No</li></ul>		No If Yes, attach a	a copy of the report.
<ul> <li>Lost? Yes No</li> <li>Stolen? Yes No</li> <li>Date of theft: Was a police re</li> </ul>	port filed? Yes N	No	•
<ul> <li>Lost? Yes No</li> <li>Stolen? Yes No</li> <li>Date of theft: Was a police re</li> </ul>	port filed? Yes No (Send any rem		•
<ul> <li>Lost? Yes No</li> <li>Stolen? Yes No</li> <li>Date of theft: Was a police re</li> <li>Destroyed? Yes No</li> </ul>	port filed? Yes No (Send any removed?		•
<ul> <li>Lost? Yes No</li> <li>Stolen? Yes No</li> <li>Date of theft:</li> <li>Was a police re</li> <li>Destroyed? Yes No</li> <li>When was the loss discover</li> </ul>	port filed? Yes No (Send any removed) and why?		•
<ul> <li>Lost? Yes No</li> <li>Stolen? Yes No</li> <li>Date of theft: Was a police region</li> <li>Destroyed? Yes No</li> <li>When was the loss discover</li> <li>Who had the securities last,</li> <li>Who had access to the securities</li> </ul>	port filed? Yes No (Send any removed? and why? urities?	naining pieces with this	form.)
<ul> <li>Lost? Yes No</li> <li>Stolen? Yes No</li> <li>Date of theft: Was a police re</li> <li>Destroyed? Yes N</li> <li>When was the loss discover</li> <li>Who had the securities last,</li> <li>Who had access to the securities last</li> </ul>	port filed? Yes No (Send any removed? and why? urities?		form.)
<ul> <li>Lost? Yes No</li> <li>Stolen? Yes No</li> <li>Date of theft: Was a police region</li> <li>Destroyed? Yes No</li> <li>When was the loss discover</li> <li>Who had the securities last,</li> <li>Who had access to the securities last,</li> <li>Where were the securities last,</li> <li>When were the securities last,</li> </ul>	port filed? Yes No (Send any removed? and why? urities? ast placed?	paining pieces with this	form.)
Lost? Yes No  Stolen? Yes No  Date of theft:  Was a police re  Destroyed? Yes N  When was the loss discover  Who had the securities last,  Who had access to the securities last,  When were the securities last,  When were the securities last,  When were the securities last,	port filed? Yes No (Send any removed? and why? urities? ast placed?	paining pieces with this	form.)
Lost? Yes No  Stolen? Yes No  Date of theft:  Was a police re  Destroyed? Yes N  When was the loss discover  Who had the securities last,  Who had access to the securities last,  When were the securities last,	port filed? Yes No (Send any removed? and why? urities? ast placed? st seen? uments also lost or stolen.	? Yes No	form.)
<ul> <li>Lost? Yes No</li> <li>Stolen? Yes No</li> <li>Date of theft: Was a police region</li> <li>Destroyed? Yes No</li> <li>When was the loss discover</li> <li>Who had the securities last,</li> <li>Who had access to the securities last,</li> <li>Where were the securities last,</li> <li>When were the securities last,</li> <li>Were any identification doct</li> <li>If Yes, please list them.</li> <li>Have you received reimburs</li> </ul>	port filed? Yes No (Send any removed? and why? and why? urities? ast placed? st seen? uments also lost or stolent seement because of the lost or firm making reimburs	? Yes No	<b>Yes,</b> please explain fully, and include the nam
<ul> <li>Lost? Yes No</li> <li>Stolen? Yes No</li> <li>Date of theft: Was a police region</li> <li>Destroyed? Yes No</li> <li>When was the loss discover</li> <li>Who had the securities last,</li> <li>Who had access to the securities last,</li> <li>Where were the securities last,</li> <li>When were the securities last,</li> <li>Were any identification doct</li> <li>If Yes, please list them.</li> <li>Have you received reimburs and address of the person</li> </ul>	port filed? Yes No (Send any removed? and why? and why? urities? ast placed? st seen? uments also lost or stolent seement because of the lost or firm making reimburs	? Yes No	form.)

What is your	legal capacity?					
Are you cour	t-appointed? Yes	No				
6. If a minor is named						
What is his/h	er age?	• What i	is his/her social security r	number?		
What is your relationship to the minor?						
original securities be the original securities and severally: (1) to United States harml demand by the Dep Treasury all sums of administrative costs of any information interest in these securities.	ecome the property of the second the United States as surrender the original ess due to any claim by partment of the Treasury f money which the Department of the Treasury and penalties, and any contained in this form occurities.	e United States. Ind bind ourselves securities to the any other parties to indemnify uncrtment may pay duother liability or loser regarding the security affirm and sa	Upon the granting of relies, our heirs, executors, as Department of the Treshaving, or claiming to hat conditionally the United State to the redemption of the ses incurred as a result of the courities described to an any that the securities described described described to an any that the securities described described to an any that the securities described descr	and if relief is granted, ac ef, we assign all our right, dministrators, successors asury if they are recover eve, interests in these sect States and to repay to the enese original securities, in- of the redemption. We cony party having an owne	title, and interest in and assigns, jointly red; (2) to hold the urities; and (3) upon a Department of the cluding any interest, nsent to the release rship or entitlement	
You	ı must wait until you	are in the prese	ence of a certifying or	fficer to sign this form		
Sign here:			Sign here:			
	(Signature)			(Signature)	-	
-						
(Numl	ber and Street or Rural Rout	te)	(N	Number and Street or Rural R	oute)	
(City)	(State)	(ZIP Code)	(City	(State)	(ZIP Code)	
	OR -(5 )		. <u> </u>	OR (Family)		
(Social Security Numb	er) (Employer Idei	ntification Number)	(Social Security N	lumber) (Employer I	dentification Number)	
(Da	aytime Telephone Number)		.	(Daytime Telephone Number	er)	
(E-Mail Address) (E-Mail Address)						
Certifying Officer	- The individuals must	sian in vour pres	sence. Complete the ce	ertification and affix you	r stamp or seal.	
I CERTIFY that		, , , , , , , , , , , , ,	I CERTIFY that			
·	wn or was proven to m	ne nersonally		nown or was proven to	me nersonally	
•	· · · · · · · · · · · · · · · · · · ·	•		· · · · · · · · · · · · · · · · · · ·	•	
appeared before the thi	s day of	(Month)	appeared before me	this day of	(Month)	
, at (Year)		(State)	, at		(State)	
	(City)	(State)	(Year)		(State)	
and signed this form.			and signed this form.			
_	(Signature of Certify	ing Officer\		(Signature of Certi	fying Officer)	
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(OFFICIAL STAMP	(T)	0.55	(OFFICIAL STAMP	(T)		
OR SEAL)	(Title of Certifying	Officer)	OR SEAL)	(Title of Certifyin	ng Oπicer)	
<del>-</del>	(Address)			(Addres	s)	
			1			

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

(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 Services, PO Box 9150, Minneapolis, MN 55480-9150.

## NOTICE UNDER THE PRIVACY ACT

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.