



UNCLAIMED PROPERTY SEARCH REQUEST

Owner

First name	Last name	Date of birth (day/month/year)
Address (street number, street, city, province, postal code)		
Telephone number ()	Email	

Owner's previous address

Address (street number, street, city, province, postal code)
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Representative (if applicable)

First name	Last name	Date of birth (day/month/year)
Address (street number, street, city, province, postal code)		
Telephone number ()	Email address	

Is the owner of the unclaimed property still living? Yes No
 If no, please provide the date of death: _____/_____/_____
 day month year

Please describe your affiliation to the unclaimed property (i.e. owner or member, beneficiary, executive, relative, attorney):



Description of unclaimed property

Description of unclaimed property <hr/> <hr/> <hr/>	
Account Number(s)	Date Account(s) Opened (dd/mm/yyyy)
Name of Client(s)	Client(s) Date of Birth (dd/mm/yyyy)

Please submit the completed form as well as all required documentation to:

FIN-XO Securities Inc.
Customer Service / Unclaimed Property
2200 avenue McGill College, Suite 350
Montréal, (Québec) H3A 3P8