



### Nevada State Treasurer – Unclaimed Property

### Online Report Filing Exception Form

*All reports are required to be submitted via the online portal.*

*If you are unable to submit your report in this manner, please complete this form, scan, and email to*

*[nvholder@nevadatreasurer.gov](mailto:nvholder@nevadatreasurer.gov)*

*If approved, Holders will be provided a one-time only exception.*

*All subsequent reports and payments must be submitted via the online portal.*

HOLDER INFORMATION		
Date:		Check only one: Insurance Annual Report <input type="checkbox"/> Annual Report (all other entities) <input type="checkbox"/> Third Party Audit <input type="checkbox"/>
Federal/Tax ID No.:		Contact Person:
Nevada Business ID: (Businesses registered with the Nevada Secretary of State only)		Email:
Holder Name:		Title/Department:
Address:		Phone #: Fax No.:
City:	State:	Zip:
Amount of Payment:		Nevada Holder ID Number:
		Preferred Method of Payment:
Does your business have the ability to submit your report using the online portal? Yes <input type="checkbox"/> No <input type="checkbox"/>		
Please provide detailed explanation below. If additional space is required, please indicate below ("see attached") and attach additional documentation.		

**I declare to the best of my knowledge and belief that the information provided above (and in any attached documentation) is true and correct.**

---

Printed Name \_\_\_\_\_ Signature (original signature required) \_\_\_\_\_ Title \_\_\_\_\_

FOR OFFICIAL USE ONLY		
Program Officer I <input type="checkbox"/> Approved <input type="checkbox"/> Denied	Program Officer Signature	Date
If denied; reason for denial:		
Deputy Treasurer <input type="checkbox"/> Approved <input type="checkbox"/> Denied	Deputy Treasurer Signature	Date
If denied; reason for denial:		