

Winfree, Ruff & Associates, Ltd.
692 Hill Road N
Pickerington, OH 43147

Client Name: _____

Federal Identification Number: _____

Contact Person & Title: _____

Ohio Unclaimed Funds Questionnaire:

	(Dormancy Period) (In Years)	Yes	No
Unclaimed Wages (payroll & salary checks) Amount \$ _____	(1)	()	()
Unclaimed Commissions Amount \$ _____	(1)	()	()
Worker's Compensation Benefits Amount \$ _____	(1)	()	()
Accounts Receivable Credit Balances or Memos Amount \$ _____	(3)	()	()
Credit Refund Checks Amount \$ _____	(3)	()	()
Refund and Rebate Checks Amount \$ _____	(3)	()	()
Expense (Reimbursement) Checks Amount \$ _____	(5)	()	()
401K (Pension) Accounts of Former Employees with Bad Addresses Amount \$ _____	(3)	()	()
Escrow Accounts (rental deposits) Amount \$ _____	(1)	()	()
Other: _____			\$ _____
None		()	()

(___) I have filed the Application for Automatic Extension of Time to File the 2007 Annual Report of Unclaimed Funds with the Ohio Division of Unclaimed Funds prior to November 1, 2007.

Signature

Date

Please return this completed document to our office by fax (614) 837-5144 by October 1, 2007. Thank you!