

HOLDER REQUEST FOR EXTENSION

HOLDER INFORMATION

	Holder Information:		Tax/FEIN Number:	
	Mailing Address:			
	City:	State:		Zip:
	Contact Person:		Phone Number:	
	Mailing Address:			
RE	QUEST INFORMATION			
	Select additional time required to complete report: ☐ 30 Days ☐ 60 Days ☐ 90 Days ☐ Other			
	Reason for Request:			
	☐ Reorganization/Merger	☐ Personnel Chang	ges	Other (Please explain):
	☐ System Problems	Problems		
CE	ERTIFICATION			
	I am requesting an extension for reporting year I am aware of Wyoming's requirement to remit abandoned property annually by November 1. I am duly authorized to execute this reques for an extension.			
	Name:	Title:		Email:
	Signature:			Date of Request:

 $This \ request \ must be \ submitted \ prior \ to \ the \ required \ filing \ due \ date. \ All \ reports \ are \ due \ November \ 1.$

