

UPR/F87
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**OFFICE OF STATE UNIFORM PAYROLL
U.S. SAVINGS BOND RESEARCH REQUEST**

TO: Office of State Uniform Payroll
1051 North Third Street, Rm. 132B
Baton Rouge, LA 70802

FROM: _____

Agency Name _____

DATE: _____

The following employee has reported to this agency that the U.S. Savings Bonds purchased through their payroll deductions have been:

___ 1. lost, stolen or destroyed **after** being received by the owner, coowner or beneficiary.

___ 2. lost, stolen or destroyed **before** being received by the owner, coowner or beneficiary.

EMPLOYEE NAME _____

EMPLOYEE SSN _____

**ISSUE DATE(S) &
NO. OF BONDS** _____

**DENOMINATION
CODE/AMOUNT** _____

OWNER NAME _____

OWNER SSN _____