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Requesting "Ineligible" Claim Designation for the Following Property (Claim Expiration 05-23-09)

AGENCIES	# of Properties	Claim Value
SLND GUARANTOR	3	219.83
ND STATE BOARD OF PHARMACY	2	300.00
NDSU	1	100.00
DEPARTMENT OF BANKING AND FIN INST	2	800.00
STATE OF NORTH DAKOTA HOSPITAL	1	56.00
ND DEPT OF HUMAN SERVICES	1	65.11
Totals	10	1,540.94