

Date (MM/DD/YYYY):

Email Address:

Fax Number:

Requestor Name:

Phone Number:

Agency Name:

Agency Code:

FedDebt Case ID:

Bureau Code:

Agency Debtor ID:

Debtor Name:

Agency Debt/File ID:

Recall Request Reason Code:

Paid in Full Date (MM/DD/YYYY):

Death Date (MM/DD/YYYY):

Bankruptcy Date (MM/DD/YYYY):

Bankruptcy Chapter:

Bankruptcy File Number:

Comments: