

NOTICE OF UNCOLLECTIBLE DEBT

STATEMENT OF UNCOLLECTIBLE ACCOUNTS

CREDITOR INFORMATION

Creditor / Company Name

Tax ID / EIN

Contact Person

Phone / Email

DEBTOR INFORMATION

Debtor Name (Individual or Business)

Account Number

Last Known Address

ACCOUNT & DEBT DETAILS

Invoice/Ref No.	Original Date	Due Date	Original Amount	Payments Made	Outstanding Balance

Date of Last Activity

Interest / Fees Added

Total Write-Off Amount

REASON FOR UNCOLLECTIBILITY STATUS

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Debtor declared bankruptcy

☐

Statute of limitations expired

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Debtor cannot be located (skip trace failed)

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Cost of collection exceeds debt value

☐

Debtor is deceased (no estate assets)

☐

Settlement agreement reached (partial write-off)

COLLECTION EFFORTS & NOTES SUMMARY

Describe actions taken (letters, calls, agency referrals, etc.)

AUTHORIZATION FOR WRITE-OFF

Prepared By (Signature & Date)

Printed Name / Title

Authorized Approved By (Signature & Date)

Printed Name / Title