



Office of the Comptroller General
 Executive Council
 P.O. Box 8700
 St. John's, NF
 A1B 4J6

Submission No. _____

APPLICATION FOR "WRITING OFF" ACCOUNTS

(Under Section 18, The Financial Administration Act)

Department: _____ Branch: _____ Date: _____

Instructions:

1. Name of Debtor: _____

2. Address: _____

Original Amount of Debtor \$ _____ 4. Date Incurred _____

LESS: Amount Paid: \$ _____ 5. Date of Last Payment _____

Current Balance \$ _____

Interest Owing: \$ _____

Total Debt \$ _____

6. Type of Debt:

7. Collection Efforts:

a) Were bills sent regularly? YES _____ NO _____
 (Specify) _____

b) Date of last billing? _____

c) Was debtor contacted by telephone? YES _____ NO _____
 (Result, if yes) _____

d) Was debtor contacted by letter? YES _____ NO _____
 (Result, if yes) _____

e) Was debtor's name added to the list of Government Debtors? YES _____ NO _____
 (If so, give the date this was done and amount collected, if any.) Date _____

f) Was the Department of Justice contacted regarding possible legal action to recover the debt? YES _____ NO _____
 (If so, what was their advice/opinion?) (attach copy)

g) Was any further action taken? YES _____ NO _____
 (If there was, explain.)

8. Reason for write-off. (Provide specific details.)

9. Further Comments.

10. Special case/guidelines. (If special case, provide details.)

11. I have supervised the stated collection procedure(s) and I am convinced that all reasonable collection methods have been attempted.

Department Accountant/Financial Manager
Director of Administration

12. In my opinion, the above amount is uncollectible and I recommend that the account be written off in accordance with established guidelines, or because of the above outlined circumstances.

Deputy Minister