

Finance & Operations
Manager
Beverly A. Brenes

Systems & Facilities
Manager
William C. Drake

TERRY E. SMITH
Standing Chapter 13 Trustee
Middle District of Florida
Tampa Division

Senior Staff Attorney
M. Eric Barksdale

Staff Attorneys
William C. Harrison
Mära B. Mandell
Caroline Cynn

PAYOFF REQUEST FORM

Use this form to request an exact payoff from the Trustee for a confirmed Chapter 13 case. All requests for payoff will also require a written explanation of the source of the funds to pay off the case. Please fax this request to (813) 658-1160, or mail to P.O. Box 6099, Sun City Center, Fl 33571-6099.

Debtor: _____

Case Number: _____

Send payoff amount to: _____

Attn: _____

Address: _____

Phone: _____ Fax: _____

Source of funds for payoff: _____

Debtor Signature: _____

(print your name on this line)

Check this box if you are requesting a payoff excluding any allowed pre-petition mortgage arrears and/or real property taxes that are being paid through the debtor's confirmed plan. **☆ Be advised that you must provide the Trustee with documentation which show that the creditor has been paid in full outside the Plan.**

T:SA\Payoff request 8-19-10

Mail Payments to: P.O. Box 830, Memphis, TN 38101-0830
Correspondence address: P.O. Box 6099, Sun City Center, FL 33571-6099
Telephone (813) 658-1165 Toll Free 1-866-658-1165 Facsimile (813) 658-1166
Trustee Website: www.ch13tampa.com