

MOTT COMMUNITY COLLEGE GENERAL ACCOUNTS RECEIVABLE WRITE-OFF REQUEST

Campus Location	date
Department	Name/Title of Requestor
Customer/Company name	Customer id#

The above referenced account is an accounts receivable account that has proven to be uncollectible. Detail to support the write-off is filed in my department. The reasons for write-off are summarized below:

<u>JUSTIFICATION FOR WRITE-OFF</u>	<u>TOTAL FROM ATTACHMENTS</u>
No support documentation for invoice(s)	\$ _____
Accounts over seven years old	_____
Accounts returned by a collection agency	_____
Bankruptcy of the debtor legally declared	_____
Company no longer exists	_____
Other (please explain)	

TOTAL DOLLAR VALUE OF WRITE-OFF \$

Approved by Cost Center Manager	Date
Approved by Vice President	Date
Reviewed by and authorized by Chief Financial Officer	Date

THE ORIGINAL FORM AND A COPY OF THE ACCOUNTS TO BE WRITTEN OFF SHOULD BE SENT TO THE ACCOUNTING OFFICE.