

REQUEST TO KEEP INCOME TAX REFUND

(Or Portion Thereof)

REQUEST AND SUPPORTING DOCUMENTATION SHOULD BE MERGED INTO ONE DOCUMENT,
FAILURE TO DO SO MAY DELAY THE REVIEW OF YOUR REQUEST

Name:

Case Number:

Tax Year:

Email address:
(if not represented by an Attorney)

Pursuant to the Administrative Order Prescribing Procedures for Chapter 13 Cases, Debtors MUST NOT spend tax refunds without first having obtained the Trustee's consent or Court approval. If your request is denied, you will be responsible for paying the full amount of the refund to the Trustee.

1. IN A BRIEF, CONCISE STATEMENT, PLEASE EXPLAIN THE REASON FOR THIS REQUEST.

2. YOUR REQUEST WILL NOT BE PROCESSED UNLESS THE FOLLOWING INFORMATION IS PROVIDED WITH THE REQUEST.

- Submit complete copy of your Income Tax Return, including all Schedules, W-2s, & 1099s.
- Turnover the Tax Refund.
Mail to: Douglas W Neway, Trustee, P O Box 2079, Memphis, TN 38101-2079
Make sure to notate Case Number and Write "Tax Refund" on Cashers Check or Money Order
You may also submit Electronically via tfsbillpay.com
- Provide written estimates for any request for repairs to your home or vehicle.
- Provide statements/bills for any request for medical treatment.
- All payments to the Trustee current at the time of this request.

If the request is approved, a copy of the actual payment for services rendered or items purchased must be provided to the Trustee. Failure to provide these receipts may result in the withdrawal of the approval.

*If the refund will be used as a down payment on a new debt you must also submit a Request to Incur New Debt found at www.ch13jaxfl.com/copy-of-helpful-forms.

**Please keep in mind that we have a large volume of cases, and we will process your request as quickly as possible. Providing the information requested above with your request will assist in the process.

Thank you.

SEND THIS REQUEST AND ALL REQUIRED INFORMATION TO YOUR ATTORNEY FOR SUBMISSION