

NOTIFICATION OF INDEBTEDNESS/INSTALLMENT LIQUIDATION AGREEMENT (7220)

NAVMC 11061 (REV. 6-86) (EF) (Previous editions are obsolete and will not be used.)

SN: 0109-LF-065-0800

FROM: DISBURSING OFFICER	DSSN	TO: COMMANDING OFFICER	RUC
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NAME OF INDEBTED MARINE (LAST, FIRST, MI)	SSN	GRADE	EAS
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1. TOTAL AMOUNT OF INDEBTEDNESS _____ (TAXABLE PORTION)
 _____ (NON-TAXABLE PORTION)

2. THE REASON FOR THE INDEBTEDNESS IS:

<input type="checkbox"/> OVERPAYMENT OF PAY AND/OR ALLOWANCES	<input type="checkbox"/> EXCESS COST OF SHIPMENT OF HOUSEHOLD GOODS	<input type="checkbox"/> CLOTHING CHECKAGE
<input type="checkbox"/> DISHONORED CHECK	<input type="checkbox"/> LOSS OR DAMAGE OF PUBLIC PROPERTY	<input type="checkbox"/> LOSS OR DAMAGE OF GOVERNMENT PROPERTY
<input type="checkbox"/> UNPAID HOSPITAL BILLS	<input type="checkbox"/> TUITION ASSISTANCE	<input type="checkbox"/> PUBLIC FUNDS OBTAINED OR CONVERTED TO OWN USE THROUGH UNLAWFUL MEANS
<input type="checkbox"/> FAMILY HOUSING DAMAGE	<input type="checkbox"/> ENLISTMENT/REENLISTMENT BONUS	<input type="checkbox"/> TRAVEL/TRANSPORTATION (EXPLAIN IN REMARKS)
<input type="checkbox"/> OTHER (EXPLAIN IN REMARKS)	<input type="checkbox"/> UNPAID RENT AND UTILITY BILLS	

3. DISPOSABLE PAY COMPUTATION:

BASIC PAY _____	LESS: SITW _____	FORFEITURE _____
SPECIAL PAY _____	FITW _____	FINE _____
INCENTIVE PAY _____	FICA _____	BANKRUPTCY _____
	SGLI _____	GARNISHMENT _____
	TAX LEVY _____	
NET MONTHLY DISPOSABLE PAY SUBJECT TO CHECKAGE _____		

RECOMMENDED MONTHLY DEDUCTION _____ . IF GREATER THAN 1/3 OF NET MONTHLY DISPOSABLE PAY, EXPLAIN IN REMARKS.

4. MARINE'S CONSENT REQUIRED FOR COLLECTION YES NO

REMARKS

SIGNATURE OF DISBURSING OFFICER	DATE
	BY DIRECTION

COMMANDING OFFICER: RETURN ORIGINAL OF THIS FORM TO THE DISBURSING OFFICER AFTER COMPLETION OF PARTS II AND III BELOW

PART II

1. I UNDERSTAND THAT I HAVE THE RIGHT TO INSPECT AND COPY RECORDS PERTAINING TO THE DEBT.
 2. I UNDERSTAND THAT I HAVE THE RIGHT TO QUESTION THE VALIDITY OF THE DEBT AND TO SUBMIT EVIDENCE OF ENTITLEMENT AND/OR PREVIOUS PAYMENT.
 3. I UNDERSTAND THAT I HAVE THE RIGHT TO MAKE A WRITTEN AGREEMENT TO REPAY THE DEBT. (INITIAL 3A OR 3B AS APPROPRIATE):
 A. I AGREE TO REPAY THE DEBT IN THE MONTHLY INSTALLMENT RECOMMENDED BY THE DISBURSING OFFICER. _____ INIT
 B. I REQUEST TO REPAY THE DEBT IN THE MONTHLY INSTALLMENT OF _____. IF I AM REQUIRED TO REPAY MY DEBT IN THE RECOMMENDED MONTHLY AMOUNT, I WOULD INCUR A SEVERE FINANCIAL HARDSHIP (COMPLETE IF CONSENT AGREEMENT IS REQUIRED.) _____ INIT
 4. I DO I DO NOT CONSENT TO COLLECTION . IF I DO NOT CONSENT TO THIS COLLECTION, I UNDERSTAND THAT COLLECTION WILL BE MADE FROM MY FINAL PAYMENT ON SEPARATION FROM THE MARINE CORPS. _____ INIT

SIGNATURE OF MARINE	DATE
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PART III

1. RECOMMEND COLLECTION AT THE MONTHLY INSTALLMENT RATE REQUESTED BY THE MARINE. THE REQUESTED COLLECTION RATE WILL LESSEN THE MARINE'S FINANCIAL HARDSHIP AND PERMIT LIQUIDATION BY THE MARINE'S EAS.
 2. THE MARINE HAS BEEN INFORMED OF HIS/HER RIGHT TO REQUEST WAIVER/REMISSION OF INDEBTEDNESS UNDER THE PROVISIONS OF TITLE 10 U.S.C. 2774 AND/OR 6161. THE MARINE DOES DOES NOT DESIRE TO APPLY FOR WAIVER/REMISSION.
 3. WAIVER/REMISSION APPLICATION IS IS NOT ATTACHED. (IF MARINE DESIRES TO REQUEST WAIVER/REMISSION AND APPLICATION IS NOT ATTACHED, EXPLAIN IN REMARKS AND PROVIDE ESTIMATED DATE APPLICATION WILL BE SUBMITTED.)

REMARKS

SIGNATURE OF COMMANDING OFFICER	DATE
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