## UNITED STATES BANKRUPTCY COURT EASTERN DISTRICT OF CALIFORNIA

## **REQUEST FOR REFUND OF INSTALLMENT FEE OVERPAYMENT**

Please fill out the top part of this form and mail to:

U.S. Bankruptcy Court Attn: Finance 501 I Street Suite 3-200 Sacramento, CA 95814

Debtor:		
Joint Debtor:		
Case Number:		
Total Amount Paid:		
Amount of Refund Requested:		

- I/we have made an overpayment on our filing fee installments and are requesting a refund from the court.
- I/we agree not to dispute these charges with my/our financial institution until we have been contacted by the court, as this may lead to a duplicate refund. In the event of a duplicate refund, I/we understand that I/we may need to appear at a hearing before the judge.
- I/we understand that it may take between 4 6 weeks for refunds to be processed.

Date:	 Signed:	
Date:	 Signed:	

## FOR COURT USE ONLY

Filing Fee Due:			Total Amount Paid:			
Refund Due:			Refund Recommended:	Yes	□ No	
Notes:						
Date:						
Signed:			3	Financial Ac	dministrator	
his request for refund is:	C	Granted	Denied	ł		
Date:	Signed:	Sco	tt Yach, Clerk of Coເ	urt		
lease contact the court a	t 916-930-4400	if you have	any questions.			

# **REQUEST FOR PAYEE INFORMATION AND TIN CERTIFICATION**

Refer to the instructions page for further information on completing this form. Vendors providing goods and services must use the AO 213 form. Note: Typed forms and forms that include a populated Type of Payee may result in more efficient and precise processing. \*\*For handwritten forms, please see the General Instructions for the list of options for the Type of Payee, Refund recipient only. Is the refund over \$200?, and Part 4 - U.S. Tax Classification, and Part 6 -Account Type drop down menus.

**Type	of Payee
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Refund recipient only. Is the refund over \$200?

Part 1 Payee Information

Line 1. Payee Name:

Line 2. Additional payee information: (if applicable)

Part 2 Business Name (if different from above)

 Part 3
 Enter only one TIN in the appropriate box. The TIN provided must match the name given in Part 1, Line 1.

 EIN:
 <u>or</u>
 SSN:

Part 4 \*\*Select the appropriate U.S. tax classification for person or entity listed in Part 1, Line 1.

#### Part 5 Mailing Address (where payments, orders, and IRS 1099 forms, as applicable, will be sent)

Street Address:	
City:	State
Point of Contact (if different from above):	
Name:	Ph
Email:	
<b>Part 6 Electronic Funds Transfer (EFT) Information</b> Owner(s) name appearing on bank account:	

Bank Name:

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Select an Account Type: Routing # (9 digits):

Account number (do not include check number)

### Part 7 Additional Payees' Signatures

(if applicable for EFT payments)

By signing as a joint payee, you are authorizing the Judiciary to make a payment on your behalf to the bank account entered in Part 6. Joint Payee(s) Signature(s):

## Part 8 Certification of Account Holder

#### Under penalties of perjury, I certify that:

- 1. The number shown on this form is my correct taxpayer identification number; and
- 2. I am not subject to backup withholding because: (a) I am exempt from backup withholding, or (b) I have not been notified by the IRS that I am subject to backup withholding as a result of a failure to report all interest and dividends, or IRS has notified me that I am no longer subject to backup withholding; and
- 3. I am a U.S. citizen or other U.S. person (defined in the instructions).

# The IRS does not require your consent to any provision of this document other than the certifications required to avoid backup withholding.

Payee Signature:

Date:

Sensitive information must be securely maintained and only visible to designated staff.

State: Zip code:

Phone #:

# **General Instructions**

**Purpose of the AO 213P**: The Judiciary utilizes the AO 213P to collect information necessary to facilitate payment. For many payments, the Judiciary is required to file an information return (e.g., 1099-MISC; 1099-NEC; 1099-INT) with the IRS and, therefore, must obtain payees' correct names and associated TINs to do so. If a TIN is not provided, a payee may be subject to backup withholding – situations where the Judiciary must withhold a certain percentage to ensure the IRS receives any tax due on the payment.

Payments disbursed by the Treasury on the Judiciary's behalf must collect payee TINs to comply with the Treasury's TIN Policy.

Payee TINs, obtained through this form, may be used by the government to collect and report on any delinquent amounts arising out of the payee's relationship with the government.

**\*\*Type of Payee:** Select the option from the Payee Type drop down menu that most accurately reflects current business operations or type of individual requesting payment from the Judiciary.

The following are the available choices for this drop down menu:

- Business Entity
- Other
- Refund Recipient
- Unclaimed Fund Claimant
- Unclaimed Funds Trustee

#### **\*\***Refund recipient only. Is the refund over \$200?

- Yes
- No

#### Part 1, Line 1

Do not leave this line blank. Enter only one name for you or your entity. The name should match the name on your or your entity's U.S. tax return.

Name or Entity	Instructions
Individual	Enter the name shown on your U.S. tax return. If you have changed your last name without
	informing the Social Security Administration of the name change, enter your first name, the
	last name as shown on your social security card, and your new last name. For Individual
	Taxpayer Identification Number (ITIN) applicants, enter your name as it was entered on your
	IRS Form W-7 application, line 1a.
Sole proprietor or Single member LLC	Enter the name shown on IRS 1040/1040A/1040EZ. You may enter your business name or
	"doing business as" (DBA) name in Part 2, as applicable.
Partnership, LLCs, or Corporations	Enter entity name as shown on the entity's U.S. tax return in Part 1. You may enter your
(except Single-member LLCs)	business name or "doing business as" (DBA) name in Part 2, as applicable.
Other entities (e.g., trusts, non-profit	Enter entity name in Part 1 as shown on required U.S. tax documents which matches the
entities, government agencies)	entity shown on the charter or legal document creating the entity, as applicable.

#### Part 1, Line 2

If this form is being completed so that a payment may be issued payable to more than one person or entity, enter in Part 1, Line 1, the name of the person or entity whose TIN you entered in Part 3. Additional names (e.g., "and" or "or") or additional information for U.S. Treasury check payments (e.g., "care of") must be entered in Part 1, Line 2.

If payments is to be made by	Then, enter the following
EFT to Payee 1 AND Payee 2, co-owners of a joint account	Payee 1's name in Part 1, Line 1;
	Payee 2's name in Part 1, Line 2;
	Payee 1's TIN in Part 3.
A Treasury check made payable to Payee 1, Payee 2, AND Payee 3	Payee 1's name in Part 1, Line 1;
	Payee 2's name AND Payee 3's name in Part 1, Line 2;
	Payee 1's TIN in Part 3.
A Treasury check made payable to Payee 1, Payee 2 OR Payee 3	Payee 1's name in Part 1, Line 1;
	Payee 2's name OR Payee 3's name in Part 1, Line 2;
	Payee 1's TIN in Part 3.
A Treasury check made payable to Payee 1, CARE OF (c/o) Power of	Payee 1's name in Part 1, Line 1;
Attorney	C/O Power of Attorney name in Part 1, Line 2;
	Payee 1's TIN in Part 3.

#### Part 2

If you have a business or DBA name, you may enter it in Part 2.

#### Part 3

Enter your or your entity's TIN in the appropriate box. The TIN must be the TIN associated with person or entity listed in Part 1, Line 1. If you are not a resident alien and do not have - and are not eligible to get - an SSN, your TIN is your ITIN. Enter it in the social security number box. If you are a sole proprietor and have an EIN, you may enter either your SSN or EIN. If the LLC is classified as a corporation or partnership, enter the entity's EIN.

## Part 4

**\*\*U.S Tax Classification:** Select the appropriate box in Part 4 for the U.S. tax classification of the person or the entity's whose name is entered in Part 1. The following are the available choices for this drop down menu:

- Individual
  - C Corporation
  - S Corporation
  - Single member LLC
  - Government Entity (fed, state, local)
  - LLC C Corp
  - LLC S Corp
  - LLC Partnership
  - Partnership
  - Trust/EstateNon-Profit Organization
  - Attorney or Law Firm (including LLCs and corporations)

#### Part 5

Enter your address (number, street, and apartment or suite number). This is where your paper Treasury check and any information returns (e.g., 1099-MISC; 1099-NEC; 1099-INT), if applicable, will be mailed. A point-of-contact (POC), email, and phone number may be entered, if desired. A POC must be entered should the POC differ from the entity or individual in Part 1, Line 1.

#### Part 6

The Routing Number must be nine digits. If you are unsure of your banking information, consult your financial institution. \*\*Account Type: You must identify your account as either checking or savings to ensure our payment is accepted by your financial institution. The following are the available choices for this drop down menu:

- Checking
- Savings

#### Part 7

For EFT payments, joint payees signing this form are authorizing one payment be made to the bank account entered in Part 6. Any associated tax reporting after receipt of the payment is the responsibility of the recipient of funds.

#### Part 8

For a payment issued to more than one person or entity, only the person whose TIN is shown in Part 3 should sign. As a signer, you must cross out item 2 if you have been notified by the IRS that you are currently subject to backup withholding because you have failed to report all interest and dividends on your tax return.

For item 3, you are considered a U.S. person, for federal tax purposes, if you are:

- An individual who is a U.S. citizen or U.S. resident alien;
- A partnership, corporation, company, or association created or organized in, or under the laws
  of the United States.
- of, the United States;An estate (other than a foreign estate); or
- A domestic trust (as defined in 26 CFR 301.7701-7).

For a joint account EFT payment or a joint payment by a Treasury check, only the person whose TIN is shown in Part 3 should sign.