

STATE OF KANSAS

Kansas Treasury Offset Program
P.O. Box 2484
Topeka, KS 66601-2484

[Debtor Full Name]

[Full Date]

[Debtor Address Line 1]

[Debtor Address Line 2]

[Last 2-Digits of TIN]

[Debtor City, State Zip]

*****NOTICE OF INTENT TO OFFSET*****

You have not paid the amount you owe to the agency indicated on the back of this notice. If you do not pay your debt or take other action described below before [Date – 60 days from date of letter], your debt will be submitted to the Treasury Offset Program (TOP). Interest, penalties, and other charges will continue to be added to your unpaid debt.

Once your debt is submitted to the TOP, the U.S. Department of the Treasury (U.S. Treasury) will reduce or withhold any eligible payments made to collect your debt. This process, known as “offset,” is authorized by the Debt Collection Improvement Act of 1996, the Deficit Reduction Act of 1984, and other laws.

Before your debt is submitted to the TOP, we are required to tell you that you may (1) inspect and copy records related to your debt; (2) request a review of the determination that you owe this debt; and (3) enter into an acceptable written repayment agreement with the agency indicated on the back of this notice. If you have any questions about your rights under this section, please contact the agency listed on the back of this notice.

TO AVOID OFFSET, you must do one of the following by [Date – 60 days from date of letter]:

- **REPAY YOUR DEBT:** To repay your debt, send a check or money order payable to the agency listed on the back of this notice for the full amount that you owe.
- **AGREE TO A REPAYMENT PLAN:** If you are unable to pay your debt in full, you must contact the agency listed on the back of this notice, agree to a repayment plan acceptable to the agency, and make payment as required in the repayment plan.
- **REQUEST AN APPEAL IF YOU BELIEVE THE DEBT IS NOT OWED:** If you believe that all or part of the debt is not past due or legally enforceable, you must notify KTOP of your intention to appeal. Send appeal requests to [KTOP mailing address here]. This notice will be the final agency action on this matter.

BANKRUPTCY: If you filed for bankruptcy and the automatic bankruptcy stay is in effect, you are not subject to offset while the stay is in effect. Please notify KTOP of the stay by sending evidence that you have filed a petition for bankruptcy.

If you make or provide any knowingly false or frivolous statements, representations, or evidence, you may be liable for penalties under the False Claims Act (31 U.S.C. §§ 3729-3731), or other applicable statutes, and/or criminal penalties under 18 U.S.C. §§ 286, 287, 1001, and 1002, or other applicable statutes.

IF YOU HAVE QUESTIONS ABOUT THIS NOTICE OR YOUR RIGHTS, YOU SHOULD CONTACT THE AGENCY LISTED ON THE BACK OF THIS NOTICE IMMEDIATELY. KTOP DOES NOT HAVE ANY INFORMATION REGARDING THE DEBT. THE AGENCY WHERE THE DEBT IS OWED HAS ALL THE DETAILED INFORMATION.

DEBT DETAIL

Creditor Agency Name:

[CA NAME]

[CA ADDRESS LINE 1]:

[CA ADDRESS LINE 2]:

Contact: [CA Contact Name]

Telephone: [CA Contact Phone]

Fax: [CA Contact Fax]

Email: [CA Contact Email]

Debt Description:

[Debt Description]

Account Number:

[Debt Account Number]

Date of Delinquency:

[Delinquency Date]

Amount:

[Debt Current Balance]
