

# U.S. Army Bankruptcy Claim Information Form

## Bankruptcy Information

Bankruptcy Case Number:

Name of Bankrupt Debtor:

## Contract Information

Army Office Affected:

Contractor Name:

\*(If the name on the contract is different from the bankrupt debtor's name, this is the name on the contract.)

Contract Number:

Contract Status:

Contract Start Date:

Contract End Date:

Contract Description:

## Outstanding Payments Due Contractor

Before Bankruptcy Filing Date:

After Bankruptcy Filing Date:

## Claim

Claim By The Army Against The Debtor:

Claim By The Debtor Against The Army

Action Desired:

Comments:

## Army Installation Points Of Contact

### Installation Attorney:

Atty. Rank:

First Name:

Middle Name:

Last Name:

Suffix:

Telephone:

E-mail:

### Installation Contracting Officer:

Rank:

First Name:

Middle Name:

Last Name:

Suffix:

Telephone:

E-mail: