

NOTICE TO ATTORNEY GENERAL'S OFFICE ADVISED PAYMENT

Client Agency:

Debtor Name:

OAG Account Number:

Type of Payment Instrument:	_____	Personal Check
	_____	Postal Money Order
	_____	Other Money Order
_____		(Financial
Institution)	_____	Official Bank/Teller's Check

(Bank Name)	_____	Cash
	_____	Debit Card
	_____	Credit Card
	_____	Certified Check
_____		(Financial
Institution)	_____	ACH Transfer
	_____	Web Payment

Instrument Number:

Amount of Payment:

Date on Payment Instrument:

Date Payment Received by Client Agency:
