Settlement/Payment Plan Offer Form

		Date:	
Name:			
City:	State:	Zip Code:	
Phone number:_		_	
MCPY file number:		_	
Settlement Offer:			
Proposed Total Am	nount to be Paid:		
Proposed Payment	Date:		
Payment Plan Off	er:		
Proposed Total Am	nount to be Paid:		
Proposed Payment	: Amount:		
Proposed Payment	t Frequency (Monthly/Bi-We	ekly/Weekly):	
Proposed First Pay	ment Date:		
Additional informa	tion:		

Miller Cohen Peterson Young P.C. will submit your Settlement/Payment Plan Offer Form to our client for their consideration once received and will contact you as soon as we have their response. All settlements and payment arrangements must be expressly approved in writing by a representative of Miller Cohen Peterson Young P.C. Making a payment or making a settlement offer will not establish a payment arrangement, nor a settlement arrangement, nor a settlement in full, without the express approval in writing by a representative of Miller Cohen Peterson Young P.C.

Miller Cohen Peterson Young P.C. is a debt collector. This is an attempt to collect a debt. Any information obtained will be used for that purpose.