

**REQUEST FOR PROMPT DETERMINATION OF ANY UNPAID TAX LIABILITY
PURSUANT TO 11 U.S.C. §505 (b)(2)**

[Taxpayer's Name] commenced a chapter **[#]** bankruptcy case on **[date]**, Case No. **##-#####**, in the United States Bankruptcy Court of _____ District of _____ **[the court where the bankruptcy case is pending]**.

Enclosed is the [type of tax return] for [account no.] for the following tax period: [specify tax period]. This return was filed on **[date]** and paid by **[check, EFT, etc.]**. Enclosed is a [copy of the check or the settlement date of the EFT payment]. **The undersigned** requests a prompt determination, pursuant to 11 U.S.C. §505(b)(2), of this postpetition tax liability.

If you require additional information, please contact **[contact name]** at **[contact's telephone number]**.

Signature
Printed/typed Name and Title