		CTED (if checked)				
CREDITOR'S name, street address, city or town, state or province, country, ZIP or foreign postal code, and telephone no.		1 Date of identifiable event 06/25/2019	OMB No. 1545-1424		• • • •	
CREDIT CARD COMPANY ANYWHERE USA		2 Amount of debt discharged \$ 3,000.00 3 Interest, if included in box 2	2020		Cancellation of Debt	
	1	\$	Form <b>1099-C</b>			
CREDITOR'S TIN	DEBTOR'S TIN	<sup>4</sup> Debt description CREDIT CARD DEBT			Сору В	
XX-XXXXXXX	XXX-XX-XXXX				For Debtor	
DEBTOR'S name MICHELLE GARDNER				This is important tax information and is being furnished to the IRS. If you are required to file a		
Street address (including apt. no.) ANYWHERE		5 If checked, the debtor was personally liable for repayment of the debt		return, a negligence penalty or other sanction may be imposed on you if		
City or town, state or province, country, and ZIP or foreign postal code CITY, STATE ZIP USA				taxable income results from this transaction and the IRS determines		
Account number (see instructions) 1234567		6 Identifiable event code	7 Fair market value of \$	property		
Form <b>1099-C</b> (keep for your records) www.irs.gov/Form1099C Department of the Treasury - Internal Revenue Service						