SCHEDULE 1

ARRANGEMENT OF FORMS

Regulation 49(1)

The Debt Arrangement Scheme (Scotland) Regulations 2004 FORM 14CONFIRMATION OF COMPLETION BY DAS ADMINISTRATOR

1	Date (Dd/mm/yyyy)						
2	Unique CMS Identifier						
3	Debtor						
	Surname		 	 	 	 	
	First Name		 	 	 	 	
	Other Names						
	Home Address						
	Business Address (If applicable)						
4	Money Adviser						
	Surname						
	First Name(s)						
	Organisation name and business address						
	Daytime Telephone No						
5	Date of approval of programme (dd/mm/yyyy)						
6	Date of completion of programme (dd/mm/yyyy)						

The Debt Arrangement Scheme (Scotland) Regulations 2004 provide for repayment of debts under debt payment programmes approved by the DAS administrator. The debt payment programme specified in this notice has been completed on payment of the debts in the programme