The accounts listed below are submitted for collection at your usual rate.

Please call me to discuss our collection problems.

By signing below the creditor represents and warranties that it has provided all required Truth in Lending disclosures to each account holder listed on this form, and obtained all necessary signatures so as to fully comply with the law.

The creditor further agrees to inform the undersigned collection agency upon its receipt of any information which would render the account information contained herein more complete, accurate, or obsolete, including but not limited to , notice of a consumer bankruptcy filing.

	Company/Practice		
	State Zi _l		
9			
Account Holders No	Account Holder' Full Name		Amount
Complete Address (include	e zip code)		Interest
Phone ()	S/S No	Delinquency Date	Total Due
Date Last Charge	Date of Birth	Date Last Pay	ment
Employer		W	ork Phone ————
Spouse Full Name	S/S No <u>.</u>		
Account Holders No	Account Holder' Full Name		Amount
	zip code)		
	S/S No		
Date Last Charge	Date of Birth	Date Last Fay	III <u>CIIL</u>
Employer	S/S No	Wo	ork Phone ————
Employer Spouse Full Name		Wo	ork Phone
Employer Spouse Full Name Account Holders No	S/S No <u>.</u>	Wo	ork Phone Amount
Employer Spouse Full Name Account Holders No Complete Address (include	S/S No <u>.</u> Account Holder' Full Name	Wo	Amount Interest
Employer Spouse Full Name Account Holders No Complete Address (include Phone ()	S/S No Account Holder' Full Name	Wo	Amount Interest Total Due
Employer Spouse Full Name Account Holders No Complete Address (include Phone () Date Last Charge	S/S No Account Holder' Full Name • zip code)S/S No	Delinquency Date Date	Amount Interest Total Due
Employer Spouse Full Name Account Holders No Complete Address (include Phone () Date Last Charge Employer	S/S No Account Holder' Full Name zip code)S/S No Date of Birth	Delinquency Date Date	Amount Amount Interest Total Due Last Payment prk Phone
Employer Spouse Full Name Account Holders No Complete Address (include Phone () Date Last Charge Employer Spouse Full Name	S/S NoAccount Holder' Full Name zip code)S/S No Date of BirthS/S No	Delinquency Date Date	Amount Amount Interest Total Due Last Payment prk Phone
Employer Spouse Full Name Account Holders No Complete Address (include Phone () Date Last Charge Employer Spouse Full Name Account Holders No	S/S No Account Holder' Full Name e zip code) S/S No Date of Birth S/S No Account Holder' Full Name_	Delinquency Date Date	Amount Amount Interest Total Due Last Payment Drk Phone Amount
Employer Spouse Full Name Account Holders No Complete Address (include Phone () Date Last Charge Employer Spouse Full Name Account Holders No Complete Address (include	S/S NoAccount Holder' Full Name rip code)S/S NoDate of BirthS/S NoS/S NoS/S NoS/S NoS/S NoS/S NoS/S NoS/S No	Delinquency Date Date	Amount Amount Interest Total Due Dork Phone Amount Interest Interest Note that the proof of
Employer Spouse Full Name Account Holders No Complete Address (include Phone () Date Last Charge Employer Spouse Full Name Account Holders No Complete Address (include Phone ()	S/S No Account Holder' Full Name zip code) Date of Birth S/S No Account Holder' Full Name_ zip code) S/S No	Delinquency Date Date Wo	Amount Amount Interest Total Due Drk Phone Amount Interest Total Due
Employer Spouse Full Name Account Holders No Complete Address (include Phone () Date Last Charge Employer Spouse Full Name Account Holders No Complete Address (include Phone () Date Last Charge	S/S NoAccount Holder' Full Name rip code)S/S NoDate of BirthS/S NoS/S NoS/S NoS/S NoS/S NoS/S NoS/S NoS/S No	Delinquency Date Date Date Date	Amount Amount Interest Total Due Private Phone Amount Interest Total Due Amount Interest Total Due ast Payment ast Payment ast Payment and