

# LEDFORD & WU

Client Name

Date

Creditor Name: \_\_\_\_\_ Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Account Number: \_\_\_\_\_ Dates Used: From \_\_\_\_\_ to \_\_\_\_\_ Balance Due: \_\_\_\_\_

Type of creditor:     Credit Card     Medical Bill     Utility     Payday Loan     Student Loan     Mortgage     Vehicle     Taxes

Was this debt:     Individual     Joint     Husband Only     Wife Only

Collection Agency or Attorney: \_\_\_\_\_ Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

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