

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 _____

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 _____

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 _____

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 _____

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 _____

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 _____