

CREDITOR INFORMATION FORM

Please list: **ALL CREDITORS** – including mortgage info, financed auto info, medical bills taxes, **ALL** companies and person to whom you owe money.

Address for each creditor (collection agencies) – address for correspondence preferred

Total amount owed to each creditor

Monthly payment to each creditor

Account number for each creditor

Court docs: *judgments, liens, civil summons, car repossession, and foreclosure notice*

NOTE: Print as many of these forms as needed to list all creditors.

It is very important that you furnish this office the full address of each creditor that you owe, including zip code. If we do not have the full address, we cannot protect you from that creditor.

Debtor's Name(s): _____

Creditor Name: _____ Bal. Owed: \$ _____ Describe Collateral: _____

Address: _____ Monthly Pmt: \$ _____ Value of Collateral: \$ _____

_____ Account #: _____

Creditor Name: _____ Bal. Owed: \$ _____ Describe Collateral: _____

Address: _____ Monthly Pmt: \$ _____ Value of Collateral: \$ _____

_____ Account #: _____

Creditor Name: _____ Bal. Owed: \$ _____ Describe Collateral: _____

Address: _____ Monthly Pmt: \$ _____ Value of Collateral: \$ _____

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