



**COLLECTION INFORMATION FORM
(BREACH OF CONTRACT)**

**ATTENTION: Please complete this form to the best of your ability REGARDLESS of having sent any prior information to the Firm
Return Completed Form To: collect@mokslaw.com**

Date: _____, 20__

Owner Information

1. Creditor's Full Legal Name: _____
2. Contact Person: _____
3. Billing Address: _____, _____, _____ Zip Code
Street Address City State
4. Telephone No: _____ Email Address: _____@_____

Requested Action

5. Please check as many categories of requested action that may apply to this case, at this time.
 - Mail Demand Letter
 - Fax Demand Letter
 - Hand Deliver Demand Letter (Carrier: Quick Delivery Services)
 - Send Other Demand (Please specify: _____)
 - File Collection Lawsuit
 - Judgment has already been entered in Case Number _____

Debtor (Party Owing You Money) Information

6. Debtor's Full Name: _____ SSN: _____ DOB: _____
 Co-Debtor's Full Name: _____ SSN: _____ DOB: _____
7. Debtor's Current Address: _____, _____, _____ Zip Code
Street Address City State
8. Co-Debtor's Current Address: _____, _____, _____ Zip Code
Street Address City State

Amounts Owed by Debtor(s)

9. PRINCIPAL AMOUNT OWED: \$ _____
10. OTHER AMOUNTS DUE: \$ _____
 Please specify the "other" amounts: _____
11. TOTAL AMOUNT OWED: \$ _____

Additional Questions

12. Do you have a signed Contract? Yes No
 a. If yes, please attach a copy to this Collection Information Form.
13. Do you have an updated Payment Ledger? Yes No
 a. If yes, please attach a copy to this Collection Information Form.
 b. Your Payment Ledger MUST match the amounts requested above.
14. Does your agreement provide for late fees? Yes No
15. Does your agreement provide for the payment of collection costs upon default? Yes No
16. Does your agreement provide for the payment of attorneys' fees upon default? Yes No

ATTENTION: If you answered "No" to questions 12-17 your case may be compromised. An attorney at The Law Offices of Anderson & Associates will contact you regarding the likelihood of success of your case.

Collection Information

17. If we obtain a judgment, do you want us to collect the money for you? Yes No
 *If you answered "Yes" to question 15, please continue to page 2.

18. EMPLOYMENT INFORMATION:

Debtor's Name: _____

Employer's Name: _____

Employer's Address: _____, _____, _____
Street Address City State Zip Code

Co- Debtor's Name: _____

Employer's Name: _____

Employer's Address: _____, _____, _____
Street Address City State Zip Code

19. BANK ACCOUNT INFORMATION:

Debtor's Name: _____

Name of Debtor's Bank: _____

Bank Address: _____, _____, _____
Street Address City State Zip Code

Co- Debtor's Name: _____

Name of Co- Debtor's Bank: _____

Bank Address: _____, _____, _____
Street Address City State Zip Code

Final Question

21. If I obtain a money judgment, and the above information is outdated, do you want me to search for new employment and bank account information? Yes No

*Attention: There are additional costs involved in running a skip trace (up to \$50.00).

I, the undersigned, am authorized to enter into this agreement on behalf of the above-named Property. I agree to have the Law Offices of Anderson & Associates litigate this matter in the appropriate Missouri or Kansas court. I also agree to pay an up-front \$500.00 attorney fee, and a filing fee and service charge within 30 days of invoicing, regardless of a third party obligation to indemnify me as a property manager. I understand that Anderson Law, LLC shall be paid thirty percent (30.00%) of the amount collected as an attorney fee for their collection services.

Signature

Printed Name

Please let us know how you heard about our Company _____