

ACCOUNT PLACEMENT FORM

Date: _____

1. Your information:

Company Name: _____

Phone: _____

Contact: _____

Fax: _____

Address: _____

E-mail: _____

City / State / Zip: _____

2. Debtor Information:

Debtor Company: _____

Customer Account Number: _____

Contact Person(s): _____

Principal Balance: _____

Address: _____

Oldest Unpaid Invoice Date: _____

City / State / Zip: _____

Phone / Cell Number: _____

*We will calculate, add and pursue finance charges and the collection fee in addition to principal and interest.

3. Please Provide the Following Information (if available):

1. Statement of Account or Copy of Invoice(s)
2. Contract/Purchase Order
3. Credit Application/Personal Guarantee
4. Collection Notes History
5. Copy of Prior Payment (if by check)
6. Disputed? ☐ Yes ☐ No
7. Select Method Of Collection: ☐ Routine ☐ Aggressive ☐ Legal

4. Additional Comments:

THE FOUR-STEP PLACEMENT FORM

We'd like to help you collect your money as quickly as possible. Start the collection process today – we can recover the money for you. Please complete this form and provide the documents/information listed in Section 3 and email or fax them to our offices at info@stevensricci.com or fax 520-546-1062.

We will immediately process your claim upon receipt. If we have any questions – or require more information – we'll contact you for clarification. You will receive a confirmation email from us before we get started. All account information is held within the strictest confidence at Stevens & Ricci.

We thank you in advance for the opportunity to serve your collection needs.