



WEST COAST ADJUSTORS

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Office (800)859-0162 Fax (425)670-8299

Member of the Washington and American Collectors
Association

List Accounts for Collection on this Sheet

Your Name Or

Firm Here: Client/Creditor # _____ Name _____
Address: _____
City: _____ State: _____ Zip _____
By: _____ Date: _____ Phone: _____

Account # _____ Debtors Full Name: _____ Spouse: _____
Address: _____ City, State, Zip: _____ Mail Ret Y N
Ph# _____ Social Security # _____ D.O.B. _____ Spouse SS# _____ Spouse D.O.B. _____
Cell Phone # _____
Employer : _____ Wk Ph# _____ Spouse's Employer: _____ Ph# _____
(last known)
Amount Due: \$ _____ Interest: \$ _____ Total Due: \$ _____ Date of Last Service _____ Last Interest Date _____
Addtl. Contact Info (Emerg. ph#, Bank info, Ref's) _____
Disputed Y N

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