

Established 1975

LOS ANGELES COLLECTION SERVICE

A division of Maddocks Collection Services, LLC www.lacollectionservice.com | E-mail: info@lacollectionservice.com Tel: 310-474-0175 • Fax: 424-276-6160

ACCOUNTS PLACEMENT FORM

Name of Client & Client Number	
Name of Dobton	SSN
Name of Debtor	
Guarantor	Home # ()
(responsible party - if minor)	Work # ()
	Cell # ()
Name of Spouse	Date of Birth
COMPANY NAME	Date of Service
(if commercial account)	
attention of	Date of Last Pay
Customer # [ref/acct.]	Amount Due \$
Address	State
City	Zip Code
Please enclose: Copies of the fo	ollowing where available
Statement: Itemized Bills:	Correspondence
Delivery Receipts: Returned Checks Invoices: Credit Report:	s: Other:
ADDITIONAL COMMENTS	
ADDITIONAL COMMENTS	