

REQUEST TO FILE SUIT FOR SIGNATURE/LINE OF CREDIT/CREDIT CARD LOAN

TO: SORENSON VAN LEUVEN, PLLC.

FROM: _____

DATE: _____

ACCOUNT #: _____

CHECK ONE: LINE OF CREDIT/SIGNATURE

CREDIT CARD

Defendant's Name (Include co-maker's name & address, if applicable): _____

Social Security Number: _____ Date of Birth: _____

Driver's License Number: _____

Current Service Address: _____

Place of Employment Address: _____

Please serve defendant at: Residence or Place of Employment

Balances as of Charge-Off Date:

Principal Balance: _____ Date Credit Agreement Signed: _____

Accrued Interest as of Today's Date: _____ Date of Charge-Off: _____
Interest as of Charge-Off Date: _____

Late Fees: _____ Date of Last Payment: _____

Per Diem: _____ Date Payment Due For: _____

Interest Rate: _____

Please attach the following documents to this form:

- Original or copy of Credit Agreement/Note
 - Copy of Current Addendum
 - Copy of Credit Application
 - Account Status Printout (account inquiry)
- Demand Letter previously sent by your office

Comments: _____
