

**DEFENDANT INFORMATION – PLEASE PRINT**

DATE: \_\_\_\_\_

ACCT / CASE NO: \_\_\_\_\_

1. OTA: \_\_\_\_\_

2. Payment of: \_\_\_\_\_ beg: \_\_\_\_\_

3. No pymt \_\_\_\_\_ Garn? \_\_\_\_\_

4. Send item \_\_\_\_\_

5. If current / call &amp; written Rel? \_\_\_\_\_

**1. ALL PERSONS SUMMONED TO APPEAR ARE REQUIRED TO COMPLETE THIS SECTION**

Name: \_\_\_\_\_ SSN \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ Home Phone: (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_

Street Address \_\_\_\_\_

City, State, Zip \_\_\_\_\_

**2. IF YOU AGREE OR THE COURT HAS DETERMINED THAT YOU OWE THE DEBT, YOU ALSO ARE REQUIRED TO COMPLETE THE REST OF THIS FORM**

DATE OF BIRTH \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_ Cell Phone \_\_\_\_\_ (\_\_\_\_) \_\_\_\_\_ Work Phone \_\_\_\_\_ (\_\_\_\_) \_\_\_\_\_ Driver's Lic # \_\_\_\_\_

Race \_\_\_\_\_ Height \_\_\_\_\_ Weight \_\_\_\_\_ Eyes \_\_\_\_\_ Hair \_\_\_\_\_ M \_\_\_\_\_ F \_\_\_\_\_ Circle One \_\_\_\_\_ Email \_\_\_\_\_

Do you have an Attorney: Y \_\_\_\_\_ N \_\_\_\_\_ Attorney Name and address: \_\_\_\_\_

**Spouse and/or Co-Debtor Information**

Name: \_\_\_\_\_ DOB: \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_ SSN \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ M \_\_\_\_\_ F \_\_\_\_\_

Address \_\_\_\_\_ Own \_\_\_\_\_ Rent \_\_\_\_\_ City, State, Zip \_\_\_\_\_ Drivers Lic # \_\_\_\_\_

Home Phone \_\_\_\_\_ (\_\_\_\_) \_\_\_\_\_ Cell Phone \_\_\_\_\_ (\_\_\_\_) \_\_\_\_\_ Work Phone \_\_\_\_\_ (\_\_\_\_) \_\_\_\_\_

Race \_\_\_\_\_ Height \_\_\_\_\_ Weight \_\_\_\_\_ Eyes \_\_\_\_\_ Hair \_\_\_\_\_ Email \_\_\_\_\_

**Employment Information**

Employer Name: \_\_\_\_\_ Spouse/ Co-Debtor Employer Name \_\_\_\_\_

\$ \_\_\_\_\_ \$ \_\_\_\_\_ \$ \_\_\_\_\_ \$ \_\_\_\_\_ \$ \_\_\_\_\_ \$ \_\_\_\_\_  
Gross Earnings Net Earnings Paid how often? Gross Earnings Net Earnings Paid how often?If not employed, list  
sources of income:1. \_\_\_\_\_  
2. \_\_\_\_\_**Bank Information**

Bank Name	Acct Number	Balance
1. _____	_____	\$ _____
2. _____	_____	\$ _____

This is a communication from a debt collector. This is an attempt to collect a debt and any information obtained will be used for that purpose.

I declare **UNDER OATH** and **UNDER PENALTY** of perjury under the laws of the State of Kansas that the foregoing is true and correct.

Defendant Signature \_\_\_\_\_

Date: \_\_\_\_\_

I expressly consent and authorize company and any of the company's authorized agents, employees, and assignees, to contact me by cell phone, text message, e-mail or via the internet at any telephone number, email address or website listed above, including method which could result in charges to me for the purpose of servicing my account. I confirm that I am the subscriber or owner of any phone number, email, or other contact information identified above, or if I am not the subscriber or owner, that I have authority to grant this permission. Methods of contact may include using pre-recorded/artificial voice messages, the use of an automatic dialing device, text messages, emails and communications via internet sites and/or social and business networking websites as applicable.

I understand I may revoke this consent at any time. I have read this disclosure and agree that the company and its authorized agents, employees, and assignees may contact me as described above.

Defendant Signature \_\_\_\_\_

Date: \_\_\_\_\_