



PRIM • MENDHEIM
ATTORNEYS AT LAW

IMMEDIATE ATTENTION

Your Company Information (For Office Use) Client Code
Name: Telephone: Fax:
Address:
City: State: Zip Code:
Primary Contact: Email:

Debtor Information

Table with 6 columns: Customer Account Number, Date Account Open, Amount Due (Principal), Date of Last Payment, Date of Oldest Unpaid Invoice, Date of Recent Unpaid Invoice

Name: Phone:
Address: Other Phone:
City: SSN:
State: Zip Code: Date of Birth:
Individual Responsible: Place of Employment:
Co-debtor Name: Co-Debtor SSN: Co-Debtor Place of Employment:
Co-debtor Address: City: State: Zip Code: Phone:
ATTACH: [] Itemized Ledger [] Signed Contract [] Any Other Relevant Documents
DOCUMENTATION: To Be - [] Faxed [] Mailed [] Emailed [] Submitted Via Website
TYPE OF DOCUMENTATION AVAILABLE:
[] Credit Application [] Statement [] Lien [] Contract [] Personal Guarantee
[] Proof of Delivery [] Purchase Order [] NSF [] Bill of Lading [] Other

We are placing the above-referenced account with Prim & Mendheim, LLC, for collection. We agree that Prim & Mendheim, LLC, is the exclusive collection agent for said account. Prim & Mendheim, LLC, is authorized at once to proceed with collection of said account. Prim & Mendheim, LLC, as our collection firm is authorized to accept payments, endorse checks, notes, money orders, and/or drafts for deposit on our behalf. Upon placement of account, commissions will be charged on any payments paid directly to client (direct payments) and any payments paid directly to agency (office payments). Additionally, we understand that, upon placement, commissions will be charged on any accounts later withdrawn or cancelled. Special authorization is required to settle account(s) and/or to file suit. If returned merchandise is accepted in lieu of payment, in whole or in part, Prim & Mendheim, LLC, is entitled to its full commission on such account for their collection efforts and recovery of merchandise. If any payments are accepted by your office, please do not write "Paid in Full" or any reference thereof unless you contact our office for the balance due, as attorney fees are added and interest, if applicable, compounds daily.

Agreed and approved, as exhibited by our signature below.

PLEASE REPORT ALL PAYMENTS MADE DIRECTLY TO YOUR OFFICE IMMEDIATELY!

Signature: _____ Auth by (Print): _____