

L
CREDIT &

LINCOLN COLLECTION AGENCIES LIMITED

C
COLLECTION

98 Queenston St., PO Box 30022, St. Catharines, ON L2S 4A1

A
SPECIALISTS

Tel: 905-688-2351

Fax: 905-688-2358

RETAIL ACCOUNT LISTING FORM-PLEASE COMPLETE AND RETURN

DEBTOR NAME: _____ SPOUSE: _____

ADDRESS: _____ TELEPHONE: _____

CITY: _____ PROV/STATE: _____ POSTAL CODE: _____

EMPLOYER: _____ TELEPHONE: _____

EMPLOYER-SPOUSE: _____ TELEPHONE: _____

AMOUNT DUE: _____ OWING SINCE? _____ DATE LAST PAID: _____

REMARKS: _____ PRE-COLLECT:(Yes/No?) _____

DEBTOR NAME: _____ SPOUSE: _____

ADDRESS: _____ TELEPHONE: _____

CITY: _____ PROV/STATE: _____ POSTAL CODE: _____

EMPLOYER: _____ TELEPHONE: _____

EMPLOYER-SPOUSE: _____ TELEPHONE: _____

AMOUNT DUE: _____ OWING SINCE? _____ DATE LAST PAID: _____

REMARKS _____ PRE-COLLECT:(Yes/No?) _____

TO EXPEDITE COLLECTION Please send us a copy of your statement of account, signed application, original N.S.F. cheque or personal or corporate guarantees or any other information that will assist us in recovering your account(s). Please use additional account listing form if required.

CREDITOR: _____ (I)

ADDRESS: _____

CITY: _____ **POSTAL CODE:** _____

TELEPHONE: _____ **FAX** _____

X _____ **DATE:** _____

(Authorized Signature)

ACCOUNTS ARE LISTED SUBJECT TO THE TERMS AND CONDITIONS SUPPLIED WITH THIS FORM

CONTACT US AT:

LINCOLN COLLECTION AGENCIES LIMITED
BOX 30022
ST. CATHARINES, ON
L2S 4A1

WWW: LCACANADA.COM

TELEPHONE: 905-688-2351

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