

FORM 6
Record of Debts and Defaults

*You must complete a separate form for each account which you are reporting. If your account is currently showing as delinquent on your credit report, you must **provide proof that it is now current** with this form.
Please Type your responses.*

Name _____ Social Security Number (999-99-9999) _____

Type of debt: Credit Card Charge Account Student Loan Support Payments Other

Account Number _____

Original Amount of Debt _____

Current Balance _____

Date of Last Payment _____

Name of Entity Extending Credit _____

Address _____

City _____ State _____ Zip _____

If different from above, current creditor on this debt:

Name _____

Address _____

City _____ State _____ Zip _____

Account Number _____

Current status of this debt

Describe the history of this debt, including any actions taken to collect and any defenses: