

## Creditor Information

Individual or Business Name: \_\_\_\_\_  
The name of the plaintiff, as listed on the judgment.

Contact Person & Relationship to Creditor: \_\_\_\_\_  
The name of the person completing this form and their association to the above plaintiff.

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Mobile Phone: \_\_\_\_\_ Alt. Phone: \_\_\_\_\_ Email: \_\_\_\_\_  
Include extension if office number.

## Judgment Information

#1

Creditor Solutions cannot enforce vacated or overturned judgment awards, judgment awards discharged through bankruptcy, or judgments awarded to claim outstanding child support.

Filing Court: \_\_\_\_\_ Filing County: \_\_\_\_\_

Filing Date: \_\_\_\_\_ Index Number: \_\_\_\_\_ Judgment Amount: \_\_\_\_\_  
Original amount awarded (before interest).

Post-judgment payments made by debtor: \_\_\_\_\_  
Payment date and amount, if applicable.

The reason why you sought this judgment: \_\_\_\_\_  
Examples: Failure to pay for goods or services, outstanding rent, breach of contract, etc.

## Debtor Information

#1

Provide responses for the following fields to the best of your ability. The more information you provide, the better equipped we'll be in the recovery process. If the judgment lists multiple debtors, see "Additional Information," below.

Individual or Business Name: \_\_\_\_\_  
The name of the defendant, as listed on the judgment.

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Mobile Phone: \_\_\_\_\_ Alt. Phone: \_\_\_\_\_ Email: \_\_\_\_\_  
Include extension if office number.

SSN: \_\_\_\_\_ EIN/TAX ID: \_\_\_\_\_ Age: \_\_\_\_\_  
Date of birth or approximate age.

Employment Information: \_\_\_\_\_  
Any known current or previous employment details.

Financial Information: \_\_\_\_\_  
Any known checking, savings, mortgage, brokerage, PayPal, credit card, cryptocurrency, or other accounts.

Additional Information: \_\_\_\_\_  
Known associations, family members, etc. Provide information about additional debtors listed in this judgment, if applicable.

Submit Your Application Using One of the Following Methods or Call (646) 814-1614



Complete your form  
online by visiting  
[creditorsolutions.com](https://creditorsolutions.com)



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Send the attached forms to  
1441 Broadway, 5th Fl,  
New York, NY 10018



Fax the attached  
forms to  
(646) 777-1710

## Judgment Information

#2

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Filing Court: \_\_\_\_\_ Filing County: \_\_\_\_\_

Filing Date: \_\_\_\_\_ Index Number: \_\_\_\_\_ Judgment Amount: \_\_\_\_\_  
Original amount awarded (before interest).

Post-judgment payments made by debtor: \_\_\_\_\_  
Payment date and amount, if applicable.

The reason why you sought this judgment: \_\_\_\_\_  
Examples: Failure to pay for goods or services, outstanding rent, breach of contract, etc.

## Debtor Information

#2

Provide responses for the following fields to the best of your ability. The more information you provide, the better equipped we'll be in the recovery process. If the judgment lists multiple debtors, see "Additional Information," below.

Individual or Business Name: \_\_\_\_\_  
The name of the defendant, as listed on the judgment.

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Mobile Phone: \_\_\_\_\_ Alt. Phone: \_\_\_\_\_ Email: \_\_\_\_\_  
Include extension if office number.

SSN: \_\_\_\_\_ EIN/TAX ID: \_\_\_\_\_ Age: \_\_\_\_\_  
Date of birth or approximate age.

Employment Information: \_\_\_\_\_  
Any known current or previous employment details.

Financial Information: \_\_\_\_\_  
Any known checking, savings, mortgage, brokerage, PayPal, credit card, cryptocurrency, or other accounts.

Additional Information: \_\_\_\_\_  
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#3

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Filing Court: \_\_\_\_\_ Filing County: \_\_\_\_\_

Filing Date: \_\_\_\_\_ Index Number: \_\_\_\_\_ Judgment Amount: \_\_\_\_\_  
Original amount awarded (before interest).

Post-judgment payments made by debtor: \_\_\_\_\_  
Payment date and amount, if applicable.

The reason why you sought this judgment: \_\_\_\_\_  
Examples: Failure to pay for goods or services, outstanding rent, breach of contract, etc.

## Debtor Information

#3

Provide responses for the following fields to the best of your ability. The more information you provide, the better equipped we'll be in the recovery process. If the judgment lists multiple debtors, see "Additional Information," below.

Individual or Business Name: \_\_\_\_\_  
The name of the defendant, as listed on the judgment.

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Mobile Phone: \_\_\_\_\_ Alt. Phone: \_\_\_\_\_ Email: \_\_\_\_\_  
Include extension if office number.

SSN: \_\_\_\_\_ EIN/TAX ID: \_\_\_\_\_ Age: \_\_\_\_\_  
Date of birth or approximate age.

Employment Information: \_\_\_\_\_  
Any known current or previous employment details.

Financial Information: \_\_\_\_\_  
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Additional Information: \_\_\_\_\_  
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Filing Date: \_\_\_\_\_ Index Number: \_\_\_\_\_ Judgment Amount: \_\_\_\_\_  
Original amount awarded (before interest).

Post-judgment payments made by debtor: \_\_\_\_\_  
Payment date and amount, if applicable.

The reason why you sought this judgment: \_\_\_\_\_  
Examples: Failure to pay for goods or services, outstanding rent, breach of contract, etc.

## Debtor Information

#4

Provide responses for the following fields to the best of your ability. The more information you provide, the better equipped we'll be in the recovery process. If the judgment lists multiple debtors, see "Additional Information," below.

Individual or Business Name: \_\_\_\_\_  
The name of the defendant, as listed on the judgment.

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Mobile Phone: \_\_\_\_\_ Alt. Phone: \_\_\_\_\_ Email: \_\_\_\_\_  
Include extension if office number.

SSN: \_\_\_\_\_ EIN/TAX ID: \_\_\_\_\_ Age: \_\_\_\_\_  
Date of birth or approximate age.

Employment Information: \_\_\_\_\_  
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Financial Information: \_\_\_\_\_  
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Additional Information: \_\_\_\_\_  
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Filing Court: \_\_\_\_\_ Filing County: \_\_\_\_\_

Filing Date: \_\_\_\_\_ Index Number: \_\_\_\_\_ Judgment Amount: \_\_\_\_\_  
Original amount awarded (before interest).

Post-judgment payments made by debtor: \_\_\_\_\_  
Payment date and amount, if applicable.

The reason why you sought this judgment: \_\_\_\_\_  
Examples: Failure to pay for goods or services, outstanding rent, breach of contract, etc.

## Debtor Information

#5

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Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Mobile Phone: \_\_\_\_\_ Alt. Phone: \_\_\_\_\_ Email: \_\_\_\_\_  
Include extension if office number.

SSN: \_\_\_\_\_ EIN/TAX ID: \_\_\_\_\_ Age: \_\_\_\_\_  
Date of birth or approximate age.

Employment Information: \_\_\_\_\_  
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Financial Information: \_\_\_\_\_  
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