

Schedule A: Judgment recovery submission form.

Creditor Information	1	
ndividual or Business Name: 🚃	no name of the plaintiff or listed on the judgment	nt.
Contact Person & Relationship	to Creditor:	pleting this form and their association to the above plaintiff.
Address:	The name of the person com	pleting this form and their association to the above plaintiff.
		Zip Code:
Mobile Phone:	Alt. Phone:	office number.
Judgment Information	on	
Creditor Solutions cannot enforce vacation		judgment awards discharged through bankruptcy, or
Filing Court:	Filing County:	
Filing Date:	No:	Judgment Amount: Amount awarded before interest.
		applicable.
Reason for seeking judgment: _	Payment date and amount, if	applicable. utstanding rent, breach of contract, etc.
G, G	xamples: Failure to pay for goods or services, ou	utstanding rent, breach of contract, etc.
Debtor Information		
Provide responses for the following field be in the recovery process. If the judgm		re information you provide, the better equipped we'll tional Information," below.
Individual or Business Name:	a name of the defendant, as listed on the judgm	ent.
Address:	e name of the defendant, as listed on the judgmi	ent.
City:	State:	Zip Code:
Mobile Phone:	Alt. Phone:	Email:
SSN:		
Employment Information:		Date of birth or approximate age.
Any know Financial Information:	n current or previous employment details.	
Financial Information: Any known che Additional Information:	cking, savings, mortgage, brokerage, PayPal, cr	edit card, cryptocurrency, or other accounts.
Known associ	ations, family members, etc. Provide information	n about additional debtors listed in this judgment, if applicable.





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online by visiting



Scan and email the

attached forms to:

forms@creditorsolutions.com

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