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UNITED ACCOUNTS, INC.
"THE COLLECTION SPECIALISTS"

ACCOUNT LISTING SHEET

Date of last service _____ Responsible Party _____
 Balance at _____ Address _____ Zip _____
 Date of last service _____ Social Security # _____ Phone # () _____ Date of Birth _____
 Fees since _____ Employer _____ Phone # () _____
 Date of last service _____ Name of Spouse _____
 Interest since _____ Social Security # _____ Employer _____
 Date of last service _____ Additional Info _____
 Payments since _____ Your Account # _____
 Date of last service _____
 Current Collection Balance _____

Date of last service _____ Responsible Party _____
 Balance at _____ Address _____ Zip _____
 Date of last service _____ Social Security # _____ Phone # () _____ Date of Birth _____
 Fees since _____ Employer _____ Phone # () _____
 Date of last service _____ Name of Spouse _____
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 Date of last service _____ Additional Info _____
 Payments since _____ Your Account # _____
 Date of last service _____
 Current Collection Balance _____

**Please
 Send Our
 Check To**

Creditor No. _____ Name _____
 Address _____ Zip _____
 By _____ Date _____ Phone No. _____
 (Name of authorized representative)