

Enrolled Creditor List

Instructions: Please list all the creditor debts you are enrolling in the CreditAnswers debt settlement program. Do NOT include any debts under \$500, any student loans that are federally insured, any tax liens to a Government Entity or Internal Revenue Service. Please include a statement from each creditor that is less than 45 days old from time of enrollment. Original statements will not be returned. Secured loans such as home loans and car loans are NOT accepted. Photo copy and fill in an additional sheet if necessary.

No.	Creditor Name	Account	Balance	Date of Last Payment	Primary (P) Co-Client (C)
1.	Institution	Number	\$	Mo., Year	Circle One Primary or Co-Client
2.	Institution	Number	\$	Mo., Year	Circle One Primary or Co-Client
3.	Institution	Number	\$	Mo., Year	Circle One Primary or Co-Client
4.	Institution	Number	\$	Mo., Year	Circle One Primary or Co-Client
5.	Institution	Number	\$	Mo., Year	Circle One Primary or Co-Client
6.	Institution	Number	\$	Mo., Year	Circle One Primary or Co-Client
7.	Institution	Number	\$	Mo., Year	Circle One Primary or Co-Client
8.	Institution	Number	\$	Mo., Year	Circle One Primary or Co-Client
9.	Institution	Number	\$	Mo., Year	Circle One Primary or Co-Client
10.	Institution	Number	\$	Mo., Year	Circle One Primary or Co-Client
11.	Institution	Number	\$	Mo., Year	Circle One Primary or Co-Client

By signing below, client acknowledges that all the information contained herein is true and correct. Client understands it may be necessary to update CreditAnswers, from time to time if any information changes during the enrollment period in the program. Client also acknowledges that they have received a copy of the CreditAnswers AnswerKit and are familiar with its contents.

Client Name (last, first)	Signature	CreditAnswers Client ID*	Date
---------------------------	-----------	--------------------------	------

*Client ID may be found on cover letter of this Welcome Kit