

Name: \_\_\_\_\_

Unique ID: \_\_\_\_\_

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

\_\_\_\_\_

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**COMPLETE THIS FORM TO OBTAIN A CASH PAYMENT**

**Instructions:**

1. Verify that your name and address information is correct. Add your telephone number and email address (if available).
2. To submit a claim for cash payment, review the statement in Section II.
3. If the statement in Section II is accurate, sign to verify that the information you are supplying is true and accurate under the penalty of perjury.

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**THE DEADLINE TO SUBMIT A CLAIM IS: JANUARY 5, 2024**

**Section I: Contact Information**

Please update your contact information if the information above is incorrect.

Name: \_\_\_\_\_

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

City, State, ZIP: \_\_\_\_\_

Telephone: \_\_\_\_\_ Email: \_\_\_\_\_

**Section II: Claim for Cash Payment**

I hereby declare that I was the subject of a consumer report generated by Credco between January 1, 2021 and May 2, 2023 and that I am not deceased.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Printed Name

**By signing your name, you are attesting to the truthfulness of this statement before a United States federal court under the penalty of perjury.**