

# **ActionCollection**

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## **IMMEDIATE ACTION COLLECTION FORM**

Submission Date: \_\_\_\_\_

Debtors Name: \_\_\_\_\_  
Debtor's Address: \_\_\_\_\_  
City/State/Zip: \_\_\_\_\_  
Home Phone: \_\_\_\_\_  
Work Phone: \_\_\_\_\_  
S.S.#: \_\_\_\_\_  
Date of Birth: \_\_\_\_\_  
Date of Service: \_\_\_\_\_  
Balance Due: \_\_\_\_\_  
Your Account #: \_\_\_\_\_  
Comments: \_\_\_\_\_  
\_\_\_\_\_

We hereby assign collection accounts to A.A. Action for collection. We hereby authorize A.A. Action to act as our agent for the purpose of collection and give them full authority to use their discretion in the settlement of these accounts. We further authorize A.A. Action to act as our agent for the purpose of instituting suit and acknowledge that representation is limited to our affirmative claim. In the event that any counterclaim, cross-claim, etc. we acknowledge that it is our responsibility to engage an attorney to defend the matter. We promise to report immediately to A.A. Action all payments made directly to us and A.A. Action shall be entitled to receive such commissions on such payment. A.A. Action retains any and all rights to accounts once we have reported them to any of the three major credit bureaus.

Company: \_\_\_\_\_  
Authorized Signature: \_\_\_\_\_  
Phone #: \_\_\_\_\_

***Please Fax this form back to us together with Itemized Bill  
or any relevant paperwork at: 973-845-9901***