

REQUEST FOR ACCOUNT INFORMATION FROM CREDITORS

You may use this form to request information about debt owed by you or your spouse. If so, send to the creditor. **DO NOT FILE THIS PAGE WITH THE COURT.**

Date: _____

Creditor's Name: _____

Creditor's Address: _____

Regarding: Superior Court of Arizona in Maricopa County

Case Name: _____

Case Number: _____

Within thirty (30) days after receipt of this notice, you are requested to provide the balance and account status of any debt identified by account number for which the requesting party may be liable to you.

Information About Debtors/Spouses:

Your Name: _____

Your Address: _____

Your Phone Number: _____

Your Spouse's Name: _____

Your Spouse's Address: _____

Information About the Account:

Account Number(s): _____

If you have any questions or if I can be of further assistance, please feel free to contact me.

Sincerely,

Your name: _____

Your signature: _____