

JL Russell & Associates, Ltd.

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Placement Form

Date Submitted:			Client:		
Debtor:			Contact:		
Address			Address		
City	State	Zip	City	State	Zip
Business Phone	Home Phone		Credit Executive:		
Business Fax			Business Phone	Business Fax	
E-mail:	Web Site:		E-mail:	Web Site:	

DEBTOR INFORMATION

DOCUMENTATION

Account Number	Secondary Yes [] No []	To assist in the handling of this Claim, we are providing:
Principal Balance	Interest	<i>Statement</i> []
Principal/Owner		<i>Invoices</i> []
Key Contact		<i>Credit application</i> []
Debtor's Bank/Account #		<i>Personal guarantee</i> []
Date of last Invoice	Date of Last Payment	<i>Proof of delivery</i> []
Debtor Entity: Corporation _____ Partnership _____ Individual _____		<i>NSF check</i> []
Experience With Debtor:		<i>NSF check copy</i> []
		<i>P/O contract</i> []
Comments:		<i>Credit reports</i> []
		<i>Copies of correspondence</i> []