## **Request to Submit a Statement\***

LexisNexis offers individuals the ability to submit a statement if their address or phone number appearing in Accurint for Collections - Contact & Locate product should not be used to collect a specific debt. Should you elect to submit a statement, the statement will be added to a database accessible by LexisNexis debt collection customers. You may request a statement only on yourself, your minor child or on behalf of someone for whom you have power of attorney. Please submit a separate request for each individual and complete all the appropriate items on the request form.

Please provide the following proof of identity along with your request.

- **STEP 1:** Complete and submit the enclosed request form to the address provided. Please fill it out legibly and completely. Any missing information may result in the inability to properly research our files.
- **STEP 2:** You must submit additional identity and address verification documents. In order to verify your identity and your address. The first document is for proof of identity. The second document is for proof of the mailing address. Billing statements should be dated within the preceding two months. **Select one document from each category**.

## Please do not mail your original document. Only send a copy of your choice of document.

Category A:	Category B:
Identification Documents:	Proof of Mailing Address (must reference the Requestor's Name and Mailing Address):
Driver's License (not expired)	Driver's License or Canadian Issued Driver's License (not expired)
• State Issued ID Card (not expired)	Major Credit Card Billing Statement*
Social Security Card	Major Bank Statement*
Canadian Issued Driver's License	Major Gas Company Credit Card Billing Statement*
(not expired)	<ul> <li>Major Department Store Credit Card Billing Statement*</li> </ul>
<ul> <li>Military Identification Cards</li> </ul>	Utility Bill* (Gas, Electric, Water, Sewer, or Cable/Satellite-Dish)
Passports	Telephone Bill*
	Major Cell Phone Service Provider Bill*
	<ul> <li>Insurance Declaration Page (must be in effect – not expired)</li> </ul>
	Please do not send your insurance card or insurance statement.
	<ul> <li>Property Tax Bill (for most current year or year immediately preceding)**</li> </ul>
	Property Deed**
	Please do not send your Property Tax Receipt.
	*Documents should be dated within the preceding two months.
	** Submit this ADDITIONAL document if information requested is for a second home or
	rental property and not your primary mailing address

**For MINOR child**: The proof of Identity (Category A) MUST include the minor's Social Security Card and a document that shows the requesting adult (i.e., parent or guardian) and minor's name from one of the three types of documents: Birth Certificate, Legal Guardianship or Immunization Record. Proof of Mailing Address (Category B) would be documentation with the requestor's name as denoted above.

In the Case of a Power of Attorney: The proof of Identity (Category A) MUST include the subject consumer's Social Security Card and a document that shows the requesting adult has Power of Attorney over such consumer. You will also need to provide proof of mailing address (Category B) for the requesting adult with Power of Attorney

**STEP 3:** Your request may be mailed, faxed or emailed to the LexisNexis Consumer Center. FAX: 866-414-4436

Email: Contact us via email at our website https://consumer-solutions.custhelp.com (select "ask a question")

Mail:

LexisNexis Risk Solutions FL Inc. Attn: Contact & Locate Inquiry P.O. Box 105610 Atlanta, GA 30348-5610

Once we have received your completed Statement Request Form and verification documents, it will take approximately 5 days to process your request.

<sup>\*</sup>LexisNexis reserves the right to limit statements to 100 words

## **Statement Submission Form**

(The statement will be added to a database accessibly by LexisNexis debt collection customers)

- To avoid delay, please provide all information requested.
- Submit the completed request form, identification and address verification documents to the mailing address on the first page.

Section I: Consumer Information	
Full Name (First, Middle, Family/Surname, Suffix)	Date of Birth (month/day/year)
Phone Number:	Social Security Number

Section II: Address Information			
Residential Street Address, including apartment number	City	State	Zip Code
Mailing address, if different than above	City	State	Zip Code

Section III: 100 Word Statement			
Address or Phone Number to which the statement should be added:	Text of Statement*		
Address:			
Phone #:			

Date:	Signature:
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\*LexisNexis reserves the right to limit statements to 100 words

Before submitting, please check to ensure you have fully completed and signed the request form.