

## Credit and Financial Loss / Inventory Form

Full Legal Name \_\_\_\_\_

Nickname(s) \_\_\_\_\_ Maiden Name \_\_\_\_\_

Date of Birth \_\_\_\_\_ Social Security Number \_\_\_\_\_

Employer/Association \_\_\_\_\_

Driver's License/Identification Card Number and State of Issue \_\_\_\_\_

\_\_\_\_\_

Current Address \_\_\_\_\_

Since (Month/Year) \_\_\_\_\_

Prior Addresses

1. \_\_\_\_\_ Dates \_\_\_\_\_

2. \_\_\_\_\_ Dates \_\_\_\_\_

3. \_\_\_\_\_ Dates \_\_\_\_\_

Telephone: Home \_\_\_\_\_ Work \_\_\_\_\_ Cell \_\_\_\_\_

### Account Inventory

Checking Account(s)

Institution \_\_\_\_\_ Account # \_\_\_\_\_

Institution \_\_\_\_\_ Account # \_\_\_\_\_

Savings Account(s)

Institution \_\_\_\_\_ Account # \_\_\_\_\_

Institution \_\_\_\_\_ Account # \_\_\_\_\_

Investment Account(s)

Institution \_\_\_\_\_ Account # \_\_\_\_\_

Institution \_\_\_\_\_ Account # \_\_\_\_\_

Major Credit Card(s)

Issuer \_\_\_\_\_ Account # \_\_\_\_\_ Exp. Date \_\_\_\_\_

Issuer \_\_\_\_\_ Account # \_\_\_\_\_ Exp. Date \_\_\_\_\_

Issuer \_\_\_\_\_ Account # \_\_\_\_\_ Exp. Date \_\_\_\_\_

**Department/Other Store Credit Card(s)**

Issuer \_\_\_\_\_ Account # \_\_\_\_\_ Exp. Date \_\_\_\_\_

Issuer \_\_\_\_\_ Account # \_\_\_\_\_ Exp. Date \_\_\_\_\_

Issuer \_\_\_\_\_ Account # \_\_\_\_\_ Exp. Date \_\_\_\_\_

**Other**

Issuer \_\_\_\_\_ Account # \_\_\_\_\_

Issuer \_\_\_\_\_ Account # \_\_\_\_\_

Issuer \_\_\_\_\_ Account # \_\_\_\_\_

Issuer \_\_\_\_\_ Account # \_\_\_\_\_

**Loss Inventory** - In the event of a loss, please fill in the following information.

Approximate date of loss \_\_\_\_\_ Date of Discovery \_\_\_\_\_

Description of loss \_\_\_\_\_

\_\_\_\_\_

The following items were: Lost  Stolen

- |  |  |   |
|--|--|---|
| <input type="checkbox"/> Driver's License            | <input type="checkbox"/> Passport            | <input type="checkbox"/> Birth Certificate              |
| <input type="checkbox"/> Health Insurance ID Card    | <input type="checkbox"/> ATM/Debit Card      | <input type="checkbox"/> Mileage Plan Card(s)           |
| <input type="checkbox"/> Military ID card            | <input type="checkbox"/> Checkbook           | <input type="checkbox"/> Dept./Other Store Credit Cards |
| <input type="checkbox"/> Major Credit Card(s)        | <input type="checkbox"/> Library Card        | <input type="checkbox"/> Video Store Card               |
| <input type="checkbox"/> Bank/Credit Card Statements | <input type="checkbox"/> Mail                | <input type="checkbox"/> Mortgage Statements            |
| <input type="checkbox"/> Social Security Card/Number | <input type="checkbox"/> Auto insurance Card |   |
| <input type="checkbox"/> Other _____                 | <input type="checkbox"/> Other _____         |   |

**Action Taken**

Have you notified the major credit bureaus? Have you requested your credit reports and that the credit bureaus place fraud alerts on your accounts?

Equifax (800.525.6285)  Yes  No Credit Report  Yes  No Fraud Alert  Yes  No

Experian (888.397.3742)  Yes  No Credit Report  Yes  No Fraud Alert  Yes  No

TransUnion (800.680.7289)  Yes  No Credit Report  Yes  No Fraud Alert  Yes  No

