



ASSURING YOUR PROFITS

Leib Solutions LLC  
PO Box 22  
Maple Shade, NJ 08052-0022  
Call 1-856-344-4120  
[www.leibsolutions.com](http://www.leibsolutions.com)



## Commercial Collection Placement Form

Email to [FT@leibsolutions.com](mailto:FT@leibsolutions.com)

### YOUR INFORMATION (CREDITOR)

By placing accounts for collection, we agree to the Uniform Collection Services Terms of Agreement  
<https://www.leibsolutions.com/collection-service-agreement/>

Your Company \_\_\_\_\_ Website \_\_\_\_\_  
Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_  
Your Signature \_\_\_\_\_ Date \_\_\_\_\_  
Your Printed Name \_\_\_\_\_ Your Title \_\_\_\_\_  
Email Address \_\_\_\_\_ Telephone \_\_\_\_\_  
Information about your business: \_\_\_\_\_

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### DEBTOR #1 INFORMATION

Debtor \_\_\_\_\_ Your Acct # \_\_\_\_\_  
Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_  
Website \_\_\_\_\_  
Debtor Contact Name(s) \_\_\_\_\_,  
Tel. \_\_\_\_\_ Mobile \_\_\_\_\_ Email \_\_\_\_\_  
Amount of Claim: \$ \_\_\_\_\_ Date of oldest Invoice \_\_\_\_\_ Date of Last Payment \_\_\_\_\_

**More Information:**  Account Disputed;  Business Closed;  Mail Returned;  Phone Disconnected  
 Bankruptcy;  No response to emails or calls. Other notes: \_\_\_\_\_

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**Attach Supporting documents.**  Statement of Account  Credit Application;  Any contracts, notes;  
 NSF checks;  Agreements about attorney fees or collection fees;  Personal Guarantee(s);   
Copies of NSF checks;  Any notes or emails regarding this matter.



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**DEBTOR #2 INFORMATION**

Debtor \_\_\_\_\_ Your Acct # \_\_\_\_\_  
Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_  
Website \_\_\_\_\_  
Debtor Contact Name(s) \_\_\_\_\_,  
Tel. \_\_\_\_\_ Mobile \_\_\_\_\_ Email \_\_\_\_\_  
Amount of Claim: \$ \_\_\_\_\_ Date of oldest Invoice \_\_\_\_\_ Date of Last Payment \_\_\_\_\_

**More Information:**  Account Disputed;  Business Closed;  Mail Returned;  Phone Disconnected  
 Bankruptcy;  No response to emails or calls. Other notes: \_\_\_\_\_

**Attach Supporting documents.**  Statement of Account  Credit Application;  Any contracts, notes;  
 NSF checks;  Agreements about attorney fees or collection fees;  Personal Guarantee(s);   
Copies of NSF checks;  Any notes or emails regarding this matter.

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**DEBTOR #3 INFORMATION**

Debtor \_\_\_\_\_ Your Acct # \_\_\_\_\_  
Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_  
Website \_\_\_\_\_  
Debtor Contact Name(s) \_\_\_\_\_,  
Tel. \_\_\_\_\_ Mobile \_\_\_\_\_ Email \_\_\_\_\_  
Amount of Claim: \$ \_\_\_\_\_ Date of oldest Invoice \_\_\_\_\_ Date of Last Payment \_\_\_\_\_

**More Information:**  Account Disputed;  Business Closed;  Mail Returned;  Phone Disconnected  
 Bankruptcy;  No response to emails or calls. Other notes: \_\_\_\_\_

**Attach Supporting documents.**  Statement of Account  Credit Application;  Any contracts, notes;  
 NSF checks;  Agreements about attorney fees or collection fees;  Personal Guarantee(s);   
Copies of NSF checks;  Any notes or emails regarding this matter.