



Mathews, Nichols and Associates, llc

&
Associates

P.O. Box 1705
Staten Island, NY 10313
Phone: (718) 761-1300 Fax: (718) 761-1309
CONSUMER CLAIM
Collection Authorization

Date _____

This Account is sent to you for collection. Please begin immediate recovery procedures against the following:

Debtor: _____

Address: _____

City, State, Zip: _____

Debtor Home / Cell / Work Tel. No: _____ Amount of Claim \$: _____

We would appreciate the following data, if available:

Itemized statements, liens, guarantee, returned checks and any other pertinent information.

Debtor's Bank(s): _____

Please include: Itemized Statement, Invoices, N.G. Check(s), Account Disputes, Personal Guarantee.

Remarks: _____

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Creditor: _____ Contact: _____

Address: _____ City _____

State, Zip: _____ Phone & Fax # _____

CLLA Rate Schedule

CONSUMER RATES:

33 1/3% All Account Balance Over \$100.00.

50% All Account Balances \$100.00 & Under.

50% All Secondary Accounts.

50% All Accounts Aged 12 Months or Over.

All claims over \$100.00 assigned to an attorney will be charged at a rate of 40% on funds collected, in addition to nominal court costs if applicable, with the exclusion of existing claims at the rate of 50% which will remain at the said rate.

All FEES CONTINGENT UPON COLLECTION EXCEPT COURT COSTS

(1) NO CLAIM WILL BE ACCEPTED FOR FREE DEMAND SERVICE ONLY.

(2) ON ACCOUNTS PAID DIRECT, OR ON ACCOUNTS WITHDRAWN PENDING COLLECTION, OR RETURN OF PRODUCT BY DEBTOR FOR CREDIT, COMMISSIONS WILL BE CHARGED.

(3) NO LEGAL ACTION IS INSTITUTED WITHOUT YOUR AUTHORIZATION.

(4) ALL MONIES REQUESTED BY THE ATTORNEY TO FILE SUIT (COURT COSTS), MUST BE ADVANCED BY THE CREDITOR, GENERALLY THESE COSTS AVERAGE ANYWHERE BETWEEN \$150.00 AND \$250.00 TO ISSUE A SUMMONS.

(5) IF WE FIND THE CLAIM OR ANY PORTION THEREOF WAS PREVIOUSLY PAID BY DEBTOR, APPLICABLE COLLECTION FEES MAY BE CHARGED AT OUR DISCRETION.

World Wide Collections