



## Account Assignment Form

### Client

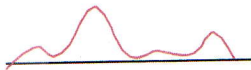
Company Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
City: \_\_\_\_\_  
State: \_\_\_\_\_ ZIP: \_\_\_\_\_  
Contact: \_\_\_\_\_  
Phone: \_\_\_\_\_  
Date of Sale: \_\_\_\_\_  
Date of Assignment: \_\_\_\_\_

### Account Receivable Information

Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
City: \_\_\_\_\_  
State: \_\_\_\_\_ ZIP: \_\_\_\_\_  
Contact: \_\_\_\_\_  
Phone: \_\_\_\_\_  
Customer Account Number: \_\_\_\_\_  
Principal Balance: \_\_\_\_\_

### Additional Liable Party / Agency

Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
City: \_\_\_\_\_  
State: \_\_\_\_\_ ZIP: \_\_\_\_\_  
Contact: \_\_\_\_\_  
Phone: \_\_\_\_\_



**The Leo A. Wrobel Companies**

**TelLAWCom Labs Inc.**

[Leo@tlc-labs.com](mailto:Leo@tlc-labs.com)  
[www.tlc-labs.com](http://www.tlc-labs.com)

**b4Ci Inc.**

[Leo@b4Ci.com](mailto:Leo@b4Ci.com)  
[www.b4Ci.com](http://www.b4Ci.com)

**Leo A. Wrobel**  
Office: (214) 888-1300  
Mobile: (214) CALL-LEO

I wish to attempt to keep this customer

Use all necessary action to recover this account

### Fees

In addition to achieving superior results for our clients, Global strives to maintain a competitive fee structure in line with prevailing industry standards and trends. Global operates on a contingency fee basis, whereby if we do not achieve results for our clients, we charge no fee. Fees on collected accounts may vary depending on several factors, including the type of account assigned, the age of the account, whether or not the account must be litigated, and the volume of accounts placed. Please submit your account information now and one of Global's trained representatives will contact you shortly and give you our most competitive rate for your specific situation.

#### TO ASSIST YOU IN THE HANDLING OF THIS CLAIM WE ARE ATTACHING:

- |   |                                      |   |   |
|---|--------------------------------------|---|---|
| <input type="checkbox"/> Credit Application | <input type="checkbox"/> Contract(s) | <input type="checkbox"/> Invoices       | <input type="checkbox"/> Statements         |
| <input type="checkbox"/> Correspondence     | <input type="checkbox"/> Ad Copy     | <input type="checkbox"/> Credit Reports | <input type="checkbox"/> Personal Guarantee |

**Our System Guarantees Results! Fax: 1-888-999-7671**

**Office Use Only: Account Executive** \_\_\_\_\_

**ASSIGNED FOR COLLECTION BY:**

**Name:** \_\_\_\_\_ **Signed:** \_\_\_\_\_

**Title:** \_\_\_\_\_ **Date:** \_\_\_\_\_