

# ChexSystems Report - Order Request by Mail or FAX

Obtaining information under false pretenses is illegal. Obtaining a report on someone other than yourself is punishable by law, and can result in fines and/or imprisonment.

**The following information is required to process your request for a ChexSystems report:**

Account Decline Date: \_\_\_\_\_ Bank or Credit Union: \_\_\_\_\_

Last Name: \_\_\_\_\_

First Name: \_\_\_\_\_

Middle Name: \_\_\_\_\_

Maiden name or other names used: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Home Phone: \_\_\_\_\_

US Social Security # \_\_\_\_\_ Birth Date: \_\_\_\_\_

US Drivers License # \_\_\_\_\_ State of Issuance: \_\_\_\_\_

**Addresses of any other residences you have had in the past five years:**

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

**Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

Order by Mail	ChexSystems, Inc Attn: Consumer Relations 7805 Hudson Rd, Suite 100 Woodbury, MN 55125
Order by Fax	(602) 659-2197