

TO: Back to Black Limited
P O Box 15 077
TAURANGA 3144

FROM:



Instructions to Recover Debts

This form is to provide Back to Black Limited with all the details you have about the person or entity which owes YOU money

Debtor/s Name in full:

- (i) If a Partnership, please provide names of all partners on a separate sheet and the trading name of the partnership
(ii) If a Company, please provide the exact name of the company

Address in full:

- (i) If a Partnership, the address of each partner
(ii) If a company, the operating address of the company

Occupation:

Date of Birth:

Telephone Number(s):

Email Address:

Goods and/or services supplied:

(Full details are required. If a combination of goods and/or services, please specify each)

Date of supply of goods and/or services:

Total sum of goods and/or services supplied:

Payments Received: (include dates)

Balance now due:

Please provide copies of all invoices and the credit application completed by your debtor (if available)

Signed by (required):

Date (required):

Please sign this form and write your name in block letters as well

It would be appreciated if you took a bit of time to complete this form in full