



CONSUMER STATEMENT REQUEST

Section A: Consumer Information

Please complete all Fields except as noted

Full Name: First Middle Last

(Check one if applicable) Jr. Sr. Date of Birth:

Social Security Number:

Full Current Address: (Information will be mailed to this address)

Street Address Apt #

City: State: Zip:

Phone numbers (Optional):

Home: Work: Cell:

Current Email Address (Optional)

Section B: Statement

You may add a brief 100 word consumer statement to append to your file. Per the Fair Credit Reporting Act, as a Consumer Reporting Agency, we must include a summary of your statement in future reports.

Signature: _____ Date: _____

Printed Name: _____

Please email or mail this completed and signed form to:

POPPL
Attn: Compliance
2727 E. Anaheim Street #4009
Long Beach, CA 90804
(888) 523-4244
admin@GoPopple.com