

In order to complete this form electronically, please save a copy to your computer. Complete the form, save the information and name the file. You will then have the ability to print the form and mail it to ChexSystems.

Chex Systems, Inc. Attn: Consumer Relations PO Box 583399 Minneapolis, MN 55458 800.513.7125

## Order Your ChexSystems Consumer Score

To order your ChexSystems Consumer Score, you must complete this form and mail it to the address listed above in our letterhead. Your Consumer Score Disclosure Report will be sent to you by mail or delivered to the ChexSystems Consumer Portal.

By submitting this request, you confirm that you have read the terms and conditions below, that you understand them and that you are in compliance with them.

## **Terms and Conditions**

- 1. You may order only your own personal ChexSystems Consumer Score. By providing your signature below, you certify that you are the person whose score is being requested.
- 2. You understand that obtaining another person's score is a violation of federal law punishable by fines and imprisonment.
- 3. You agree to provide your accurate identifying information and understand that ChexSystems may access, store and use this information to the extent permitted by law.

*Denotes required fields			
*First Name	Middle Name	*Last Name	
Other Names Used			
*U.S. Social Security Number		*Date of Birth	
U.S. Driver's License Number		_ State of Issuance	<u>.</u>
*Address (Street, PO Box, Apt #)			
*City	*State	*Zip	
Daytime Telephone Number			
*Signature		_*Date	