

Phone: (630) 543-6176 Fax: (630) 543-6195

repo@armorrecovery.com

CLIENT ASSIGNING REPOSSESSION ORDER

Client Name:	Pnone	Fax	Email:	
DEBTOR		(CO-DEBTOR	
Name:		Name:		
Address:		Address:		
City:		City:		
State:	_ Zip:	State:	Zip:	
SS#	D.O.B	SS#	D.O.B	
Cell:		Cell:		
Past Due Amount :	Loan Balance:	Other reason for repo:		
EMPLOYMENT				
Name:		Name:		
Address:		Address:		
City:		City:		
State:	_Zip	State:	Zip	
Phone:		Phone:		
VEHICLE INFO				
Year: Make:		Color:	Plate#	
VIN#				
ADDITIONAL INFO				

