

**American Financial Management Credit Bureaus Authorization Form**

This Credit Bureaus Authorization Form (hereinafter the “Agreement”) is made and entered into by and between American Financial Management, Inc. (“AFM”) and Your Company Name (“Client”), as described below.

AFM partnered with Experian and TransUnion (collectively, the “Credit Bureaus”) to provide Client, at no cost to Client, with the ability to report their debtors’ delinquent account balances to the Credit Bureaus. By reporting the debtors’ delinquent account balances to the Credit Bureaus, Client obtains additional leverage in their collection efforts. AFM and Client agree to the following terms and conditions:

- Client authorizes AFM to report their debtor’s delinquent account balances to the Credit Bureaus on all open and active accounts that Client assigns to AFM for third-party collections.
- In accordance with the Fair Credit Reporting Act (“FCRA”), Client is the contributor of the data reported to the Credit Bureaus. Credit information must be reported accurately. Client therefore agrees to report to AFM, in writing, any modification to the delinquent account balance, including the specific reason for such change, within thirty (30) days of the account balance adjustment. AFM will then modify the information reported to the Credit Bureaus.
- AFM is only able to report delinquent account balances to the Credit Bureaus on active AFM collection accounts. Therefore, Client agrees that all *uncollectible* accounts remain open and active in AFM’s database for credit bureaus reporting purposes. Due to the fact that AFM will provide the data to the Credit Bureaus on Client’s behalf, the delinquent mark on the debtor’s credit report will appear as AFM.
- While credit bureau reporting is active and ongoing, Client agrees that AFM is due its’ customary contingency fee on applicable collection activity in accordance with AFM’s Published Rate Schedule and [AFM's Terms and Conditions](#).
- AFM will pay for all administrative Credit Bureau reporting services’ costs. However, Client agrees that neither AFM, nor the Credit Bureaus, under any circumstances, will be liable for any consequential, incidental, or specific damages arising from this Agreement.

Date: \_\_\_\_\_

Your Company Name (Client): \_\_\_\_\_

Signature: \_\_\_\_\_

Signatory Name: \_\_\_\_\_

Signatory Job Title: \_\_\_\_\_

