

Order Your Report Offline

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 either mail or fax it to ChexSystems.

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Obtaining information under false pretenses is illegal. Obtaining a report on someone other than yourself is punishable by law, and can result in fines and/or imprisonment.

In order for Chex Systems, Inc. to properly identify the information contained in your consumer file, please provide the following information:

First Name				
Middle Name				
Last Name Maiden name or ot last names used	her			_
Address* (Street, PO Box, Apt #)				
City		State Zip		
Phone Number		Phone Type Home O Cell O		
U.S. Social Security#		Birth Date		
U.S. Driver's License #		State of issuance		
*ChexSystems will o	correspond with you at the abo	ve address	unless you request otherwis	е
Addresses of any	other residences you have h	ad in the pa	st five years	
Address (Street, PO Box, Apt #) City				
Address (Street, PO Box, Apt #) City				
Address (Street, PO Box, Apt #) City		State	Zip	
Signature		Date		
Order by Mail	Chex Systems, Inc Attn: Consumer Relations 7805 Hudson Rd, Suite 100 Woodbury, MN 55125			
Order by FAX	Fax to 602 659 2197			