



CREDIT REPORTING, LLC

"all you need is One"

713-460-3300 voice / 713-460-2211 fax

REQUEST/ORDER FORM

PLEASE PROCESS THE ATTACHED IRS FORM 4506T "REQUEST FOR COPY OF TRANSCRIPT"

DATE: _____

CLIENT: _____

REQUESTED BY: _____

TELEPHONE: _____

EMAIL ADDRESS: _____

REQUESTING

Tax Returns: (1040) _____ **W2s (4506)** _____ **SSN Validation:** _____

BORROWER NAME: _____

SSN: _____ - _____ - _____

CO- BORROWER NAME: _____

SSN: _____ - _____ - _____

Years Requested: 1 yr _____
 2 yrs _____
 3 yrs _____
 4 yrs _____

Signed 4506, 4506T or SS Validation Authorization form must be attached