

IN THE CIRCUIT COURT OF THE STATE OF OREGON  
FOR THE COUNTY OF \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
Plaintiff  
v.  
\_\_\_\_\_  
\_\_\_\_\_  
Defendant

Case No: \_\_\_\_\_

**CONSUMER DEBT COLLECTION  
DISCLOSURE**

*UTCRC 5.180(2)*

This action seek collection on a debt under ORS 646A.670. I, Plaintiff, have complied with ORS 646A.670(1).

I am a:

- debt buyer  
 debt collector. This is an action on a debt buyer's behalf.

Information about the debt I am seeking to collect:

➤ **Creditor and Debtor Information:**

Original creditor's name, as used in dealings with debtor:

Name, address, and telephone number of the person who owns the debt:

➤ **Account Information:**

- Last four digits of the original creditor's account number for the debt, if the account had four or more digits: \_\_\_\_\_
- The date on which the debt buyer purchased the debt: \_\_\_\_\_

➤ **Debt Information:**

See the attached detailed and itemized statement that shows the information listed below *(if not checked, complete all information below)*

○ **Payment Information**

- The debtor made no payment
- The debtor made at least one payment
  - \*Amount debtor last paid: \_\_\_\_\_
  - \* Date of last payment: \_\_\_\_\_
  - \*Amount and date of debtor's last payment before debtor's default or before debt was charged-off: \_\_\_\_\_

○ **Balance Information:**

\* Balance due on the date the debt was charged-off: \_\_\_\_\_

○ *Other Information (check all that apply):*

Imposed by original creditor, if known to plaintiff:

Amount and rate of interest: \_\_\_\_\_

Fees, if any: \_\_\_\_\_

Charges: \_\_\_\_\_

Imposed by debt buyer (or any prior owner), if known to plaintiff:

Amount and rate of interest: \_\_\_\_\_

Fees, if any: \_\_\_\_\_

Charges, if any: \_\_\_\_\_

Fees sought by plaintiff, if any: \_\_\_\_\_

Any other fee, cost, or charge that the debt buyer seeks to recover:

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**I hereby declare that the above statements are true to the best of my knowledge and belief, and that I understand they are made for use as evidence in court and I am subject to penalty for perjury.**

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Name (printed)

\_\_\_\_\_  
Contact Address

\_\_\_\_\_  
City, State, ZIP

\_\_\_\_\_  
Contact Phone