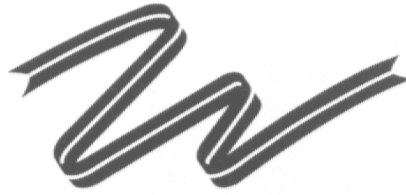


WOODFINES LLP

Debt Recovery
Instruction form



Your Details

Company Name

Contact Name

Address

.....

Telephone Number

Fax Number

Email Address@.....

Number of Employees

Business Turnover

Debtor's Details

Name of debtor

A limited company Partnership Individual Other trading entity

Company Number (if limited company)

Business Address

.....

Registered Office Address (if registered company)

.....

Contact Name

Telephone Number

Fax Number

Email Address

Details of Debt (please use a separate form for each debt)

Invoice Number

Amount of Invoice

Date of Invoice

Date payment was due

Your debtor's reference

Do you have standard terms and conditions and were these supplied to the debtor? Yes No

Do you wish to recover interest? Yes No

Interest rate applicable to debt (as set out in terms and conditions if applicable)

Calculation of interest to date

Calculation of daily interest

If your terms and conditions do not provide for interest or there are no standard terms and conditions applicable to this debt, do you wish to claim interest and compensation under the Late Payment of Commercial Debts (Interest) Act 1998 (if applicable) Yes No

Brief description of the goods/services supplied to which this invoice relates

.....
.....
.....
.....

Brief description of efforts made to date to recover debt

.....
.....
.....
.....

Any other relevant information

.....
.....
.....
.....

Please attach copies of:

- The invoice;
- Any standard terms and conditions that apply; and
- Copies of any correspondence to date with the debtor in respect of the debt

.....
Name

.....
Signature

.....
Position

.....
Date

Please sign and return this form to:

Woodfines LLP
226-228 Upper Fifth Street
Regency Court
Milton Keynes
MK9 2HR

Fax: 01908 202 152
Email: acarter@woodfines.co.uk