

DATA FILE REQUEST

This form is to be used to request a copy of your Employment Data file. An Employment Data file is a disclosure of the information available to authorized companies concerning your employment. To receive a copy of your Employment Data Report by mail, simply complete and return this form along with proof of identity and proof of address. One item from each of the following two categories is required:

Proof of Identity

Please include a photocopy of one of the following:

- State Driver's License
- Military ID
- State Issued ID Card
- W-2

Proof of Address

Please include a photocopy of one of the following, dated within the last two months (the item must reference requestor's name and mailing address):

- Electric Bill
- Cable Bill
- Telephone Bill
- Satellite TV Bill
- Gas Bill

First Name: Last Name: Middle:

Any aliases or maiden names you've worked under or have been known by:

Date of birth: Address:

City: State: Zip:

Phone number: Email:

PLEASE PROVIDE A LIST OF YOUR PREVIOUS EMPLOYERS AND JOB LOCATIONS

EMPLOYER NAME	JOB LOCATION
1. <input type="text"/>	1. <input type="text"/>
2. <input type="text"/>	2. <input type="text"/>
3. <input type="text"/>	3. <input type="text"/>
4. <input type="text"/>	4. <input type="text"/>
5. <input type="text"/>	5. <input type="text"/>

Notice: Your R.E.F.S.[™] File ID number will be displayed on your Data File.

Please fully complete this form and return it by mail or fax. The mailing address and fax number are provided below. Remember to include your proof of identity and proof of address from the lists above.

REFEREE INC

Att: CONSUMER DATA FILE REQUEST
44349 Lowtree Ave
Suite 114 | Lancaster, CA 93534
Fax: 833-879-7333