

RAISE YOUR SCORE

Member Name: _____ Member Number: _____

Annual Salary \$ _____ Rent/Mortgage \$ _____

Child Support \$ _____

List any vehicles you have to assist with your evaluation: (additional vehicles on the back of form)

	Year/Make/Model	VIN#	Mileage
Options:	_____	_____	_____
	_____	_____	_____
	_____	_____	_____

I authorize Lexington Postal Credit Union to pull a credit report so they may review my financial portfolio. *(this inquiry will not show up on your credit report or effect your score)*

Signature

Date

Phone#