

**Consumer Information**

Consumer Name: MINNIE MOUSE  
 Date of Birth: 07/06/1995  
 Social Security Number: 4XX-XX-XXXX (Confirmed)  
 State of Issuance: IA  
 SSN Issue Date: 001995  
 SSN Status: Confirmed  
 SSN Match:  
 SSN Match Flags:  
 File Since Date: 07/21/2010  
 Date of Last Activity: 01/05/2016  
 Address: 2003 1ST STREET  
 NEWTOWN, CA  
 Date First Reported: 02/2013  
 Date Last Reported: 01/2016  
 Address Source: Equifax  
 Address Variance Indicator:  
 Phone:  
 Phone Source:  
 Date First Reported:

**Potential Negative Information**

Public Records	1
Repossession Accounts	0
Charge-off Accounts	4
Foreclosure Accounts	0
Bankruptcy Accounts	0
Collections	9
30 Day Delinquencies	18
60 Day Delinquencies	11
90 Day Delinquencies	21
<b>Alerts</b>	
Address Discrepancy	No
Fraud Victim Alert	No
SSN Affirm	
OFAC	No
Inquiries in the last 2 years	3

**Inquiry Summary**

Most Recent Inquiry: COMENITY BANK/GORDMA (11/07/2015)

**Customer Inquiry**

Name: MINNIE MOUSE Date of Birth: 07/06/1995  
 Address: NEWTOWN, IA SSN: 4XX-XX-XXXX  
 Age: Reference Number: LD

**Account Age**

Length of Credit History: 5 years 6 months  
 Average Account Age: 2 Years  
 Oldest Open Account: DEPT OF ED/NELNET ( Opened on 09/10 )  
 Most Recent Account: F NGERHUT/WEBBANK ( Opened on 11/15 )

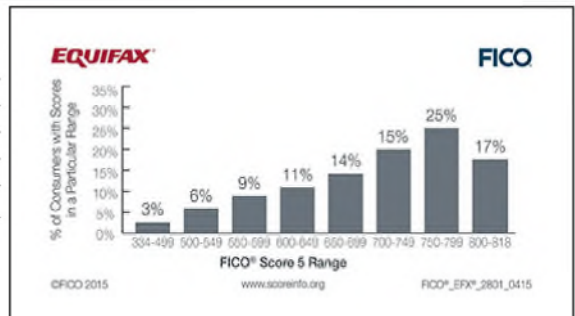
**Active Account Details Summary**

Account Type	Total	Balance	Available	Credit Limit	Past Due	Payment Amount
Revolving	7	\$ 2,237	\$ 663	\$ 2,900	\$ 2,087	\$ 50
Installments	4	\$ 16,783	\$ 3,051	\$ 19,834	\$ 1,317	\$ 352
Total	11	\$ 19,020	\$ 3,714	\$ 22,734	\$ 3,404	\$ 402

**Scorecard(s)**

**FICO Score 5 based on Equifax Data (NF)**

Score:	439
Factors:	Serious delinquency, and derogatory public record or collection filed Time since delinquency is too recent or unknown Number of accounts with delinquency Length of time accounts have been established
Score Range:	334-818
Consumer Rank:	1%



**Public Records**

<b>1</b>	Legal	Case Number:	[REDACTED]	Date Filed:	07/2013
		Amount:	\$ 115	Legal Type:	Abstract Judgment
		Plaintiff:	MM F NANCE LLC	Date Satisfied:	
		Defendant:	[REDACTED]	Status Type:	
		Member Number:	[REDACTED]	Date Verified:	
		Narrative:		Date Reported:	

**Collections**

<b>1</b>	N/A 6YC000000	Date Reported:	12/15/2015	Amount:	\$ 50
		Date Assigned:	10/31/2014	Balance:	\$ 52
		Date of First Delinquency:	08/15/2014	Account Number:	[REDACTED]
		Last Payment Date:		Creditor:	Medical/Health Care
		Status:	Unpaid	Account Owner:	Individual Account.
		Status Date:	12/15/2015	Narrative:	Medical

<b>2</b>	N/A 6YC000000	Date Reported:	12/15/2015	Amount:	\$ 50
		Date Assigned:	09/12/2014	Balance:	\$ 53
		Date of First Delinquency:	04/19/2014	Account Number:	[REDACTED]
		Last Payment Date:		Creditor:	Medical/Health Care
		Status:	Unpaid	Account Owner:	Individual Account.
		Status Date:	12/15/2015	Narrative:	Medical

<b>3</b>	N/A 6YC000000	Date Reported:	12/15/2015	Amount:	\$ 50
		Date Assigned:	08/18/2014	Balance:	\$ 53
		Date of First Delinquency:	04/06/2014	Account Number:	[REDACTED]
		Last Payment Date:		Creditor:	Medical/Health Care
		Status:	Unpaid	Account Owner:	Individual Account.
		Status Date:	12/15/2015	Narrative:	Medical

<b>4</b>	N/A 6YC000000	Date Reported:	12/15/2015	Amount:	\$ 50
		Date Assigned:	05/29/2014	Balance:	\$ 53
		Date of First Delinquency:	03/16/2014	Account Number:	[REDACTED]
		Last Payment Date:		Creditor:	Medical/Health Care
		Status:	Unpaid	Account Owner:	Individual Account.
		Status Date:	12/15/2015	Narrative:	Medical

<b>5</b>	N/A 6YC000000	Date Reported:	12/15/2015	Amount:	\$ 50
		Date Assigned:	10/17/2013	Balance:	\$ 55
		Date of First Delinquency:	07/17/2013	Account Number:	[REDACTED]
		Last Payment Date:		Creditor:	Medical/Health Care
		Status:	Unpaid	Account Owner:	Individual Account.
		Status Date:	12/15/2015	Narrative:	Medical

<b>6</b>	N/A 6YC000000	Date Reported:	12/15/2015	Amount:	\$ 50
		Date Assigned:	07/15/2013	Balance:	\$ 56
		Date of First Delinquency:	05/03/2013	Account Number:	[REDACTED]
		Last Payment Date:		Creditor:	Medical/Health Care
		Status:	Unpaid	Account Owner:	Individual Account.
		Status Date:	12/15/2015	Narrative:	Medical

<b>7</b>	SYRACUSE GENERAL STORES 6YC000000	Date Reported:	03/05/2015	Amount:	\$ 45
		Date Assigned:	04/29/2013	Balance:	\$ 135
		Date of First Delinquency:	04/29/2013	Account Number:	[REDACTED]
		Last Payment Date:		Creditor:	Retail
		Status:	Unpaid	Account Owner:	Individual Account.
		Status Date:	03/05/2015	Narrative:	Returned check

<b>8</b>	N/A 6YC000000	Date Reported:	03/08/2015	Amount:	\$ 50
		Date Assigned:	01/21/2015	Balance:	\$ 50
		Date of First Delinquency:	03/05/2014	Account Number:	[REDACTED]
		Last Payment Date:		Creditor:	Medical/Health Care
		Status:	Unpaid	Account Owner:	Individual Account.
		Status Date:	03/08/2015	Narrative:	Medical

**9** N/A  
6YC000000

Date Reported: 11/16/2014  
 Date Assigned: 07/23/2014  
 Date of First Delinquency: 08/07/2013  
 Last Payment Date:  
 Status: Unpaid  
 Status Date: 11/16/2014

Amount: \$ 50  
 Balance: \$ 50  
 Account Number:  
 Creditor: Medical/Health Care  
 Account Owner: Individual Account.  
 Narrative: Medical

**Trade Lines**

**1** AARON RENTS  
  
 1015 COBB PLACE BLVD. KENNESAW GA  
 30144 , (678) 402-3629

<b>Balance:</b>	<b>Credit Limit:</b>	<b>Actual Payment:</b>	<b>Scheduled Payment:</b>	<b>Past Due:</b>
\$ 432	\$ 0	\$ 0	\$ 0	\$ 432

30	60	90	Year	J	F	M	A	M	J	J	A	S	O	N	D
			2015							*	*	*	*	9	9

<b>Account Type:</b> Installment	<b>Account Owner:</b> Individual Account.	<b>Terms Frequency:</b> Monthly (due every month)	<b>Deferred Payment Start Date:</b>
<b>Loan Type:</b> Lease	<b>Months Reviewed:</b> 2	<b>Terms Duration:</b> 1 Months	<b>Balloon Payment Amount:</b>
<b>Status:</b> Charge-off	<b>Date Reported:</b> 01/08/2016	<b>High Credit:</b>	<b>Charge Off Amount:</b> \$ 508
<b>Comments:</b> Charged off account	<b>Date Opened:</b> 07/03/2015	<b>Date Of First Delinq:</b> 10/2015	<b>Balloon Payment Due Date:</b>
	<b>Date Of Last Payment:</b> 10/2015	<b>Date Major Delinquency First Reported:</b> 11/2015	<b>Creditor Classification:</b>
	<b>Date Of Last Activity:</b>	<b>Date Closed:</b>	<b>Activity Designator:</b>
			<b>Original Creditor:</b>

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VON MAUR

6565 BRADY ST HOLLYWOOD, CA

Balance:	Credit Limit:	Actual Payment:	Scheduled Payment:	Past Due:
\$ 0	\$ 0	\$ 0	\$ 0	\$ 0

30	60	90	Year											
2	1	0	J	F	M	A	M	J	J	A	S	O	N	D

Account Type:	Revolving	Account Owner:	Individual Account.	Terms Frequency:		Deferred Payment Start Date:	
Loan Type:	Charge Account	Months Reviewed:	49	Terms Duration:		Balloon Payment Amount:	
Status:	Charge-off	Date Reported:	12/31/2015	High Credit:	\$ 113	Charge Off Amount:	
Comments:	Charged off account	Date Opened:	11/30/2011	Date Of First Delinq:	01/2012	Balloon Payment Due Date:	
		Date Of Last Payment:	04/2012	Date Major Delinquency First Reported:	08/2012	Creditor Classification:	
		Date Of Last Activity:		Date Closed:		Activity Designator:	Closed
						Original Creditor:	

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DEPT OF ED/NELNET

121 SOUTH 13TH ST LINCOLN NE 68508 , MAIL ONLY

Balance:	Credit Limit:	Actual Payment:	Scheduled Payment:	Past Due:
\$ 6,657	\$ 0	\$ 0	\$ 80	\$ 312

30	60	90	Year											
0	0	6	J	F	M	A	M	J	J	A	S	O	N	D
			2015	1	1	1	1	1	1	1	1	1	4	
			2014	1	4	5	5	1	1	1	1	1	4	5
			2013											1

Account Type:	Installment	Account Owner:	Individual Account.	Terms Frequency:	Monthly (due every month)	Deferred Payment Start Date:	
Loan Type:	Education Loan	Months Reviewed:	51	Terms Duration:	120 Months	Balloon Payment Amount:	
Status:	At least 120 days or more than four payments past due	Date Reported:	12/31/2015	High Credit:	\$ 5,500	Charge Off Amount:	
Comments:	120 Days past due	Date Opened:	09/07/2011	Date Of First Delinq:	09/2015	Balloon Payment Due Date:	
		Date Of Last Payment:	05/2014	Date Major Delinquency First Reported:		Creditor Classification:	
		Date Of Last Activity:		Date Closed:		Activity Designator:	
						Original Creditor:	

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DEPT OF ED/NELNET

121 SOUTH 13TH ST LINCOLN NE 68508 , MAIL ONLY

Balance:	Credit Limit:	Actual Payment:	Scheduled Payment:	Past Due:
\$ 7,085	\$ 0	\$ 0	\$ 86	\$ 333

30	60	90	Year											
0	0	6	J	F	M	A	M	J	J	A	S	O	N	D
			2015	1	1	1	1	1	1	1	1	1	4	
			2014	1	4	5	5	1	1	1	1	1	4	5
			2013											1

Account Type:	Installment	Account Owner:	Individual Account.	Terms Frequency:	Monthly (due every month)	Deferred Payment Start Date:	
Loan Type:	Education Loan	Months Reviewed:	63	Terms Duration:	120 Months	Balloon Payment Amount:	
Status:	At least 120 days or more than four payments past due	Date Reported:	12/31/2015	High Credit:	\$ 5,500	Charge Off Amount:	
Comments:	120 Days past due	Date Opened:	09/03/2010	Date Of First Delinq:	09/2015	Balloon Payment Due Date:	
		Date Of Last Payment:	05/2014	Date Major Delinquency First Reported:		Creditor Classification:	
		Date Of Last Activity:		Date Closed:		Activity Designator:	
						Original Creditor:	

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COMENITY BANK/BUCKLE

PO BOX 182789 ATTN: CUSTOMER SERVICE COLUMBUS OH 43218 , MAIL ONLY

Balance:	Credit Limit:	Actual Payment:	Scheduled Payment:	Past Due:
\$ 53	\$ 300	\$ 0	\$ 25	\$ 0

30	60	90	Year											
			J	F	M	A	M	J	J	A	S	O	N	D
			2015										E	

Account Type:	Revolving	Account Owner:	Individual Account.	Terms Frequency:	Monthly (due every month)	Deferred Payment Start Date:	
Loan Type:	Charge Account	Months Reviewed:	1	Terms Duration:		Balloon Payment Amount:	
Status:	Pays account as agreed	Date Reported:	12/18/2015	High Credit:	\$ 53	Charge Off Amount:	
Comments:		Date Opened:	11/07/2015	Date Of First Delinq:		Balloon Payment Due Date:	
		Date Of Last Payment:		Date Major Delinquency First Reported:		Creditor Classification:	
		Date Of Last Activity:	12/2015	Date Closed:		Activity Designator:	
						Original Creditor:	

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FNB WEST U

115 N VINE BOX 244 WEST UNION AZ

<b>Balance:</b>	<b>Credit Limit:</b>	<b>Actual Payment:</b>	<b>Scheduled Payment:</b>	<b>Past Due:</b>
\$ 2,609	\$ 0	\$ 200	\$ 186	\$ 240

30	60	90	Year	J	F	M	A	M	J	J	A	S	O	N	D
10	5	3	2015	1	1	1	1	1	1	2	1	1	2	2	
			2014	1	1	2	2	1	1	2	3	4	4	1	1
			2013												1

<b>Account Type:</b> Installment	<b>Account Owner:</b> Individual Account	<b>Terms Frequency:</b> Monthly (due every month)	<b>Deferred Payment Start Date:</b>
<b>Loan Type:</b> Note Loan	<b>Months Reviewed:</b> 50	<b>Terms Duration:</b> 62 Months	<b>Balloon Payment Amount:</b>
<b>Status:</b> Not more than two payments past due	<b>Date Reported:</b> 12/16/2015	<b>High Credit:</b> \$ 8,834	<b>Charge Off Amount:</b>
<b>Comments:</b> Fixed rate	<b>Date Opened:</b> 09/19/2011	<b>Date Of First Delinq:</b> 09/2015	<b>Balloon Payment Due Date:</b>
	<b>Date Of Last Payment:</b> 12/2015	<b>Date Major Delinquency First Reported:</b>	<b>Creditor Classification:</b>
	<b>Date Of Last Activity:</b>	<b>Date Closed:</b>	<b>Activity Designator:</b>
			<b>Original Creditor:</b>

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FINGERHUT/WEBBANK

6250 RIDGEWOOD ROAD ST CLOUD MN 56303 , (366) 734-0342

<b>Balance:</b>	<b>Credit Limit:</b>	<b>Actual Payment:</b>	<b>Scheduled Payment:</b>	<b>Past Due:</b>
\$ 0	\$ 500	\$ 0	\$ 0	\$ 0

30	60	90	Year	J	F	M	A	M	J	J	A	S	O	N	D
			2015											E	

<b>Account Type:</b> Revolving	<b>Account Owner:</b> Individual Account	<b>Terms Frequency:</b> Monthly (due every month)	<b>Deferred Payment Start Date:</b>
<b>Loan Type:</b> Charge Account	<b>Months Reviewed:</b> 1	<b>Terms Duration:</b>	<b>Balloon Payment Amount:</b>
<b>Status:</b> Pays account as agreed	<b>Date Reported:</b> 12/15/2015	<b>High Credit:</b> \$ 0	<b>Charge Off Amount:</b>
<b>Comments:</b>	<b>Date Opened:</b> 11/08/2015	<b>Date Of First Delinq:</b>	<b>Balloon Payment Due Date:</b>
	<b>Date Of Last Payment:</b>	<b>Date Major Delinquency First Reported:</b>	<b>Creditor Classification:</b>
	<b>Date Of Last Activity:</b>	<b>Date Closed:</b>	<b>Activity Designator:</b>
			<b>Original Creditor:</b>

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DISCOVER BANK

PO BOX 15316 ATT:CMS/PROD DEVELOP WILMINGTON DE 19850-5316 , (800) 347-2683

<b>Balance:</b>	<b>Credit Limit:</b>	<b>Actual Payment:</b>	<b>Scheduled Payment:</b>	<b>Past Due:</b>
\$ 1,636	\$ 1,200	\$ 0	\$ 0	\$ 1,636

30	60	90	Year	J	F	M	A	M	J	J	A	S	O	N	D
4	3	6	2015	9	9	9	9	9	9	9	9	9	9	9	
			2014	2	3	4	5	1	1	2	3	4	5	5	5
			2013												1

<b>Account Type:</b> Revolving	<b>Account Owner:</b> Authorized User	<b>Terms Frequency:</b> Monthly (due every month)	<b>Deferred Payment Start Date:</b>
<b>Loan Type:</b> Credit Card	<b>Months Reviewed:</b> 31	<b>Terms Duration:</b>	<b>Balloon Payment Amount:</b>
<b>Status:</b> Charge-off	<b>Date Reported:</b> 12/15/2015	<b>High Credit:</b> \$ 1,569	<b>Charge Off Amount:</b>
<b>Comments:</b> Charged off account	<b>Date Opened:</b> 05/08/2013	<b>Date Of First Delinq:</b> 12/2013	<b>Balloon Payment Due Date:</b>
	<b>Date Of Last Payment:</b> 04/2014	<b>Date Major Delinquency First Reported:</b> 12/2014	<b>Creditor Classification:</b>
	<b>Date Of Last Activity:</b>	<b>Date Closed:</b>	<b>Activity Designator:</b>
			<b>Original Creditor:</b>

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COMENITY BANK/GORDMA

PO BOX 182789 COLUMBUS OH 43218 , MAIL ONLY

<b>Balance:</b>	<b>Credit Limit:</b>	<b>Actual Payment:</b>	<b>Scheduled Payment:</b>	<b>Past Due:</b>
\$ 97	\$ 250	\$ 0	\$ 25	\$ 0

30	60	90	Year	J	F	M	A	M	J	J	A	S	O	N	D
			2015											E	

<b>Account Type:</b> Revolving	<b>Account Owner:</b> Individual Account	<b>Terms Frequency:</b> Monthly (due every month)	<b>Deferred Payment Start Date:</b>
<b>Loan Type:</b> Charge Account	<b>Months Reviewed:</b> 1	<b>Terms Duration:</b>	<b>Balloon Payment Amount:</b>
<b>Status:</b> Pays account as agreed	<b>Date Reported:</b> 12/11/2015	<b>High Credit:</b> \$ 97	<b>Charge Off Amount:</b>
<b>Comments:</b>	<b>Date Opened:</b> 11/07/2015	<b>Date Of First Delinq:</b>	<b>Balloon Payment Due Date:</b>
	<b>Date Of Last Payment:</b>	<b>Date Major Delinquency First Reported:</b>	<b>Creditor Classification:</b>
	<b>Date Of Last Activity:</b> 12/2015	<b>Date Closed:</b>	<b>Activity Designator:</b>
			<b>Original Creditor:</b>





CALI STATE BANK

3210 2ND STREET, LOS ANGELES, CA

Balance:	Credit Limit:	Actual Payment:	Scheduled Payment:	Past Due:
\$ 0	\$ 0	\$ 0	\$ 101	\$ 0

Account Type:	Installment	Account Owner:	Joint Account	Terms Frequency:	Monthly (due every month)	Deferred Payment Start Date:
Loan Type:	Secured	Months Reviewed:	2	Terms Duration:	24 Months	Balloon Payment Amount:
Status:	Pays account as agreed	Date Reported:	10/2010	High Credit:	\$ 2,021	Charge Off Amount:
Comments:	Fixed rate	Date Opened:	07/2010	Date Of First Delinq:		Balloon Payment Due Date:
		Date Of Last Payment:	09/2010	Date Major Delinquency First Reported:		Creditor Classification:
		Date Of Last Activity:	09/2010	Date Closed:	09/2010	Activity Designator: Paid and Closed
						Original Creditor:

## Additional Addresses

Address	First Reported	Last Reported	Source	City	State	Zip Code	Phone Number	Source	Reported
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## Inquiries

Customer Name	Customer Number	Date of Inquiry	Purpose
COMENITY BANK/GORDMA		11/07/2015	Credit Report
F NGERHUT/WEBBANK		11/07/2015	Credit Report
COMENITY BANK/BUCKLE		11/07/2015	Credit Report

## Online Directory Information

Customer Number	Name	Phone Number	Address	City	State	Zip Code
	AARON RENTS	(678) 402-3629	1015 COBB PLACE BLVD.	KENNESAW	GA	30144
	VON MAUR		6565 BRADY ST	HOLLYWOOD	CA	
	DEPT OF ED/NELNET	MAIL ONLY	121 SOUTH 13TH ST	LINCOLN	NE	68508
	COMENITY BANK/BUCKLE	MAIL ONLY	PO BOX 182789 ATTN: CUSTOMER SERVIC	COLUMBUS	OH	43218
	FINGERHUT/WEBBANK	(866) 734-0342(	6250 RIDGEWOOD ROAD	ST CLOUD	MN	56303
	DISCOVER BANK	800) 347-2683M	PO BOX15316 ATT:CMS/PROD DEVELOP	WILMINGTON	DE	19850 5316
	COMENITY BANK/GORDMA	AIL ONLY	PO BOX 182789	COLUMBUS	OH	43218
	COMENITY BANK/VCTRSS	MAIL ONLY	PO BOX 182789	COLUMBUS	OH	43218
	FIRST PREMIER	(605) 357-3440	3820 N LOUISE AVE TAPE ONLY	SIOUX FALLS	SD	57107
	COMENITY BANK/MAURIC	MAIL ONLY	PO BOX 182789	COLUMBUS	OH	43218
	CALI STATE BANK					
	COMENITY BANK/BUCKLE	MAIL ONLY	PO BOX 182789 4590 E BROAD ST	COLUMBUS	OH	43218
	FINGERHUT/WEBBANK	(800) 356-2347	6509 FLYING CLOUD DRIVE	EDEN PRAIRIE	MN	55344
	COMENITY BANK/GORDMA	MAIL ONLY	PO BOX 182789	COLUMBUS	OH	43218

## Non-Regulated

### Alerts Summary

#### SafeScan Warning

SAFESCANNED: Your inquiry has gone through our SAFESCAN data base.

NOTICE: SAFE SCAN IS NOT A CONSUMER REPORT. CLIENT MAY NOT USE SAFE SCAN AS PART OF ITS DECISION-MAKING PROCESS FOR DETERMINING AN INDIVIDUAL'S ELIGIBILITY FOR ANY CREDIT OR ANY OTHER PURPOSE AUTHORIZED UNDER THE FCRA.

#### Address Discrepancy

NO SUBSTANTIAL DIFFERENCE OCCURRED

#### OFAC Alerts

Transaction Date: 01/15/2016

Time: 12:51:50

Type: Nothing to Report

NO MATCH FOUND IN CDC'S OFAC DATABASE.

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Equifax Information Services LLC., PO BOX 740241, Atlanta, GA 30374-0241, (800) 685-1111, [www.equifax.com/fcra](http://www.equifax.com/fcra)

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