

Trufina, Incorporated  
73 Franklin Street  
Annapolis, MD 21403  
Phone: 301.951.8998  
FAX: 410.267.7711



## Data Verification Form

Please complete this form and return it to Trufina along with the documentation requested below.

Name \_\_\_\_\_

Address \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Phone \_\_\_\_\_

Date of birth \_\_\_\_\_

I hereby affirm that the data provided is my own and is accurate and current.

Signature \_\_\_\_\_

Please send a photocopy of the following

- **Valid driver's license.** All of the following must be visible:
  - o Name
  - o Address (if different provide documentation of address change)
  - o Date of birth
  - o Driver's license number
  - o Name of state issuing license
- **Recent phone bill.** All of the following must be visible:
  - o Name
  - o Address
  - o Phone number (must match number provided above)
  - o Account number
  - o Name of company issuing bill

You may obscure any information that is not required, such as height and weight information from your driver's license, or call history on your phone bill.

Send this form, along with accompanying documentation, to Trufina at the address or FAX number at the top of this form.