

[Your Name]
[Your Address]
[City, State, Zip Code]
[Your Phone Number]
[Your Email Address]

[Date]

[Bank/Financial Institution Name]
[Department Name, e.g., Collections/Billing]
[Address]
[City, State, Zip Code]

RE: Notice of Intent to Offset Credit Card Debt

Account Number: [Your Credit Card Account Number]

To Whom It May Concern,

I am writing to formally request a debt offset regarding my outstanding credit card balance for the account mentioned above.

Currently, I hold a positive balance in the following account(s) with your institution:

- Account Type: [e.g., Savings/Checking]
- Account Number: [Secondary Account Number]

Due to [briefly state reason, e.g., financial hardship or account consolidation], I am requesting that you apply the funds available in my [Savings/Checking] account to offset the current debt on my credit card account. Specifically, I authorize the transfer of \$[Amount] from my [Savings/Checking] account to be applied directly toward my credit card balance.

Please provide written confirmation once this offset has been processed and inform me of any remaining balance or changes to the status of my accounts. If there are specific forms required to complete this action, please send them to my address immediately.

Thank you for your assistance in this matter.

Sincerely,

[Your Signature]
[Your Printed Name]