

[Your Name]
[Joint Account Holder's Name]
[Your Address]
[City, State, Zip Code]
[Your Phone Number]
[Date]

[Name of Original Creditor]
[Billing/Dispute Department Address]
[City, State, Zip Code]

RE: Joint Account Number: [Account Number]

Dear Customer Service Department,

We are writing to formally dispute the validity of the debt associated with the above-referenced joint account. We are exercising our rights under the Fair Credit Billing Act (FCBA) and other relevant consumer protection laws to request full validation of this alleged debt.

Please provide the following documentation to verify this account:

- A complete history of all charges, payments, and interest adjustments on the account.
- A copy of the original signed credit agreement or contract establishing this joint account.
- Verification that the statute of limitations for collecting this debt has not expired.
- Proof of our legal liability for the specific amount currently being claimed.

Until this information is provided and the debt is fully validated, we request that you cease all collection activities. Additionally, if this account has been reported to any credit bureaus, please ensure it is marked as "disputed" immediately as required by law.

We look forward to receiving the requested documentation within 30 days. Thank you for your prompt attention to this matter.

Sincerely,

[Your Signature]

[Your Printed Name]

[Joint Account Holder's Signature]

[Joint Account Holder's Printed Name]