

[Your Names]
[Your Address]
[City, State, Zip Code]
[Your Phone Number]
[Date]

[Debt Collector Name]
[Debt Collector Address]
[City, State, Zip Code]

**RE: SECOND ATTEMPT - NOTICE OF DISPUTE AND REQUEST FOR DEBT
VALIDATION**

Account Number: [Account Number]
Creditor Name: [Original Creditor Name]
Reference Number: [Reference Number]

To Whom It May Concern,

This is our second formal request regarding the alleged debt mentioned above. We previously sent a validation request on [Date of First Letter], but we have not received a sufficient response or the required documentation as mandated by the Fair Debt Collection Practices Act (FDCPA).

We are formally disputing the validity of this debt. We do not acknowledge this debt and request that you provide competent evidence that we have a legal obligation to pay you. Please provide the following information:

- Proof of the agreement between the original creditor and the account holders.
- A complete payment history and breakdown of the alleged amount, including principal, interest, and fees.
- Evidence that your agency is licensed to collect debt in our state.
- A copy of the last billing statement sent by the original creditor.
- Proof that the statute of limitations for this debt has not expired.

Under the FDCPA, you must cease all collection activities, including reporting this to credit bureaus, until you provide the requested validation. If you have already reported this to any credit bureau, please ensure it is marked as "disputed."

Failure to provide this validation within 30 days may result in legal action or a formal complaint to the Consumer Financial Protection Bureau (CFPB) and our State Attorney General's office.

Sincerely,

[Signature 1]
[Printed Name 1]

[Signature 2]

[Printed Name 2]