

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

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

RE: Notice of Dispute and Request for Debt Validation

Account Number: [Insert Account Number]

Original Creditor: [Insert Original Creditor Name]

Primary Borrower: [Insert Name of Primary Borrower]

To Whom It May Concern,

I am writing to formally dispute the validity of the aforementioned debt and your claim that I am responsible for it as a co-signer. I am exercising my rights under the Fair Debt Collection Practices Act (FDCPA), 15 U.S.C. § 1692g, to request full validation of this debt.

Please provide the following information and documentation:

- A copy of the original signed contract or agreement showing my signature as a co-signer.
- A complete statement of account history, including the original balance, all payments made by the primary borrower, and any interest or fees added.
- Verification that the primary borrower has defaulted and that all collection efforts against them have been exhausted according to the terms of the contract.
- Proof of your authority to collect this debt and your license to operate in my state.

Please note that this is not a refusal to pay, but a formal request for verification. If you fail to provide the requested documentation within 30 days, you must cease all collection activity and remove any derogatory information related to this account from my credit reports.

Furthermore, I request that you limit all future communications regarding this matter to written correspondence only at the address provided above.

Sincerely,

[Your Signature]

[Your Printed Name]