

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

[Date]

[Name of Debt Collector]  
[Name of Collection Agency]  
[Address]  
[City, State, Zip Code]

**RE: Dispute of Debt for Account Number: [Your Account Number]**

To Whom It May Concern,

I am writing to formally dispute the debt associated with the account number listed above. I received your notice dated [Date of notice] regarding a debt allegedly owed to [Name of Original Creditor].

I am disputing this debt because [Select one or more reasons]:

- I do not owe this debt.
- The amount requested is incorrect.
- This debt was already paid or settled.
- This debt is past the legal statute of limitations for collection.
- I have no record of this account.

Under the Fair Debt Collection Practices Act (FDCPA), I request that you provide me with the following information to validate this debt:

1. Verification of the amount owed.
2. The name and address of the original creditor.
3. Proof that you are authorized to collect this debt.
4. A copy of the original contract or agreement.

Please cease all collection activities regarding this account until you have provided the requested validation. Furthermore, if you have reported this debt to any credit reporting agencies, please notify them that the debt is being disputed.

Sincerely,

[Your Signature]

[Your Printed Name]