

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

[Date]

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

RE: Account Number [Insert Account Number]

To Whom It May Concern,

I am writing to formally dispute the validity of the debt referenced above. I am exercising my rights under the Fair Debt Collection Practices Act (FDCPA) to request formal verification of this debt.

I do not recognize this debt and do not believe I owe the amount claimed. Please provide the following information:

- Proof that I have a legal obligation to pay you.
- A complete payment history and a copy of the original signed contract.
- The name and address of the original creditor.
- Verification that the statute of limitations for collecting this debt has not expired.
- Documentation showing that you are legally licensed to collect debt in my state.

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 reporting agency, I request that you mark the account as "disputed" immediately.

Please note that this letter is not a refusal to pay, but a request for verification. Furthermore, I request that you limit all future communications to written mail only. Do not contact me by telephone at my home or place of employment.

I look forward to receiving the requested documentation within 30 days.

Sincerely,

[Your Signature]

[Your Printed Name]