Date:		
From		
	[Name]	
	[E-mail address]	
	- ·	
	, [Address	5]
То		
-	[Debt collector's name]	
	[Address]
Via Certified Mail		
Re: Validation for Acco	ount No	[Account number]
To Whom it May Conce	ern:	
This letter is in respons	se to your contact	[Contact method] on
		[Contact time] about the alleged
		This is neither an acknowledgement of debt or a
refusal to pay, but a no	tice to request validation.	
you allege is due to you	•	I am entitled to request validation of the debt that e debt but rather a request for you to provide gation to provide payment to you
	-	
You must provide the fill letter.	ollowing alleged information to me	within thirty (30) days from your receipt of this
 Creditor's Nam 	ne and Full Address	
 Name of Debto 	or of Record	
 Full Account N 	umber	
 Amount of Deb 	ot	
 Due Date of De 	ebt	
 Original Charg 	e Off or Delinquency Date	
 Explanation of 	how the Debt was calculated	
 Evidence that 	the Debt is within State's applicab	le Statute of Limitation
 Name of Collect 	ction Agency or Owner of Debt, if	applicable
 Amount Paid if 	Debt was Purchased	
 Completed and 	d Executed Agreement, including	Signature Pages, for the Debt
•		
•		

that this debt is mine.	
Thank you for your consideration.	
Sincerely,	
	_[Signature]
	_ [Print name]

Pursuant to my rights under the FDCPA, I will be ignoring any future collection attempts until you verify