

# **Inquiry for TransUnion Credit Report**

Your Name  
Your Address  
City, State, ZIP Code  
Email Address  
Phone Number  
Date: [Insert Date]

TransUnion LLC  
P.O. Box 2000  
Chester, PA 19016

Dear TransUnion Customer Service,

I am writing to request a copy of my credit report as provided under the Fair Credit Reporting Act. My details are as follows:

Name: [Your Full Name]  
Social Security Number: [Your SSN]  
Date of Birth: [Your DOB]  
Address: [Your Current Address]  
Previous Address (if applicable): [Previous Address]

Please send my credit report to my mailing address provided above. If you require any further information or documentation to process my request, please do not hesitate to contact me.

Thank you for your assistance.

Sincerely,  
[Your Name]