

Debt Validation Request

Date: [Insert Date]

[Your Name]

[Your Address]

[City, State, Zip Code]

[Your Email]

[Your Phone Number]

[Creditor's Name]

[Creditor's Address]

[City, State, Zip Code]

Dear [Creditor's Name],

I am writing to request validation of the debt referenced by your recent communication dated [insert date of correspondence]. According to the Fair Debt Collection Practices Act, I have the right to request a validation of this debt.

Please provide me with the following information:

- The amount of the debt;
- The name of the original creditor;
- A copy of the agreement that created the debt;
- Any judgment details, if applicable.

Until this information is received, I request that you cease all collection efforts related to this debt. Please respond within 30 days of receiving this request.

Thank you for your attention to this matter.

Sincerely,

[Your Name]