Formal Request to Erase Debt Post-Payment

Your Name

Your Address City, State, Zip Code Email Address Phone Number

Date: [Insert Date]

Recipient's Name

Company's Name Company's Address City, State, Zip Code

Dear [Recipient's Name],

I hope this message finds you well. I am writing to formally request the erasure of my debt associated with account number [Insert Account Number] which was fully paid on [Insert Payment Date].

As per our agreement, and upon receipt of my last payment, I believe I am entitled to a confirmation that my debt has been settled, and I request that all related records be updated accordingly to reflect this payment.

Thank you for your attention to this matter. I look forward to your prompt response confirming the removal of this debt from your records.

Sincerely, [Your Name]