

THE DISPUTE LETTER
Fill in the Blanks Dispute

Date: _____

From:

Name

Address

City, ST Zipcode

To:

Experian Credit Reporting
Consumer Dispute Department
P.O. Box 9595
Allen, TX 75013-2104

Subject: Credit Report # _____

To Whom It May Concern,

Please be advised that the following accounts needs to be investigated. Please verify if these accounts belong to me. I believe they are listed on my credit file in error.

1. _____
2. _____
3. _____
4. _____

Please remove all derogatory information from my credit report regarding the above creditors. I can be reached at the address above or by telephone at _____.

Sincerely,

Sign
Consumer

Print Name