Date

Your Name
Your Address
Your City, State, Zip

Complaint Department
Name of Credit Reporting Agency
Address
City, State, Zip

I am writing to dispute the following information in my file. The items I dispute also are circled on the attached copy of the report I received.

(Identify items disputed by name of source, such as creditors or tax court, and identify type of item, such as credit account, judgment, etc.) My credit report is (inaccurate or incomplete) because (describe what is inaccurate, including name of source and type of item, and why it is inaccurate or incomplete). I am requesting that the item be deleted or corrected on my credit report. Enclosed are copies of (list documents enclosed such as payment records, court documents, etc.) supporting my position.

Please re-investigate this matter and (delete or correct) the disputed item as soon as possible.

Sincerely,

Your name