

[Attorney/Representative Name]
[Law Firm/Organization Name]
[Address Line 1]
[Address Line 2]
[Phone Number]
[Email Address]

[Date]

[Creditor/Credit Bureau Name]
[Fraud Department Address]
[City, State, Zip Code]

RE: LETTER OF REPRESENTATION AND FORMAL FRAUD DISPUTE

Client Name: [Client Full Name]

Client DOB: [Date of Birth]

Client SSN: [Last 4 Digits or Full SSN]

Account Number(s) involved: [List Account Numbers]

To Whom It May Concern,

Please be advised that this office represents [Client Full Name] in connection with the identity theft and fraudulent activity associated with the account(s) referenced above. All further communications regarding this matter should be directed to our office.

My client is a victim of identity theft. They did not authorize the opening of the aforementioned account(s), nor did they receive any benefit, goods, or services from the transactions associated with these accounts. This dispute is filed pursuant to the Fair Credit Reporting Act (15 U.S.C. § 1681i) and the Fair Credit Billing Act (15 U.S.C. § 1666).

Enclosed with this letter, please find:

- A copy of the Identity Theft Report / Police Report (Report #[Number]).
- A copy of the FTC Identity Theft Affidavit.
- Proof of my client's identity (Copy of ID/Utility Bill).
- A signed Authorization for Release of Information/Power of Attorney.

I formally request that you:

1. Immediately cease all collection efforts against my client regarding these fraudulent debts.
2. Conduct a thorough investigation into the fraudulent activity.
3. Remove any negative information or trade lines related to these accounts from my client's credit reports.
4. Provide my office with copies of all application records and transaction logs related to the fraudulent accounts.

Please provide a written response confirming the receipt of this letter and the status of your investigation within thirty (30) days.

Sincerely,

[Signature]

[Printed Name]

[Title/Bar Number]