«Todays\_Date\_MMMM\_DD\_YYYY»

«Account\_Address\_Block»

File No. «Account\_Number»

Creditor: «CliFile\_Name»

Creditor Reference No. «Client\_Ref\_Num»

Amount Due: «Actual\_Total\_Jmt\_NonJmt\_Owing»

This letter will confirm our prior telephone conversation, wherein you disclosed your desire to reconnect your «CliFile\_Name» (“ADT”) service. In order for ADT to consider your reconnection request, you must first bring your ADT account number «Client\_Ref\_Num» current by submitting a «Special\_Field3» payment.

The «Special\_Field3» payment can be sent to our office through any of the following methods:

1. Mail – draft a check payable to ADT with file number «Account\_Number» on the memo line and mail the check to our office at the address below
2. Online\* – pay with check or credit card with our processor: [**https://www.afm-usa.com/payment**](https://www.afm-usa.com/payment)
3. Phone\* – pay with check or credit card by contacting our office at **(847) 259-4700**.

\*A convenience fee will be assessed for both check or credit card payments made online or by phone.

Along with the «Special\_Field3» payment, please sign and date this letter, make a copy for your records, and then send it back to us by postal mail, email, or fax. Please see all contact information details below. Upon receiving the «Special\_Field3» payment and this signed letter, we will provide your reconnection request to ADT.

Thank you,

«COLLECTOR\_NAME\_SIGNATURE»

**«Collector\_Pseudonym»**

«X1005\_Signature\_Co\_Line\_1» «X1006\_Signature\_Co\_Line\_2»

P.O. Box 31579, Chicago, IL 60631

P: (847) 259-4700 | F: (847) 259-9434

This is an attempt to collect a debt by a debt collector. Any information obtained will be used for that purpose.

Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Printed Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Title: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_