**{Transunion File Number}**

**{First Name} {Middle Name} {Last Name} {Suffix}**

**{Address}**

**{City}, {State} {Zip code}**

**{Date of Birth mm/dd/yyyy}**

**{Social Security Number XXX-XX-XXXX}**

**{Today’s Date mm-dd-yyyy}**

**Dear Transunion,**

**I am requesting that you remove the following accounts from my credit report as they are caused by identity theft.**

**Creditor: {Creditors Name}**

**Account Number: {Account Number}**

**Date Opened: {Date Opened mm/yyyy}**

**Creditor: {Creditors Name}**

**Account Number: {Account Number}**

**Date Opened: {Date Opened mm/yyyy}**

**Creditor: {Creditors Name}**

**Account Number: {Account Number}**

**Date Opened: {Date Opened mm/yyyy}**

**Creditor: {Creditors Name}**

**Account Number: {Account Number}**

**Date Opened: {Date Opened mm/yyyy}**

**Creditor: {Creditors Name}**

**Account Number: {Account Number}**

**Date Opened: {Date Opened mm/yyyy}**

**Thank you**