

[Your full name]  
[Medical collection account number]  
[Your address]

[Date]

Re: Disputing a medical collection account on my credit report

To whom it may concern,

I am writing to request the investigation and correction of a medical debt that appears on my **[name of credit bureau: Equifax/Experian/TransUnion]** consumer credit report. The medical collection account is listed under account number **[account number]**, and the account was opened on **[opening date]**.

The original owner of this debt is **[name of healthcare provider]**. The account reflects an alleged debt of **[amount owed]** for charges incurred on **[billing date for medical services]**.

This medical collection is **[inaccurate/incomplete/obsolete]** because **[describe which information is inaccurate or incomplete or why it should be deleted (e.g., the medical bill was paid by insurance or is more than seven years old)]**. I am requesting that the item **[be removed or otherwise changed]** to correct the information.

I have enclosed copies of my credit report with the disputed information highlighted. I have also attached **[any other supporting documents, such as payment records and court documents]** to support my dispute.

Please reinvestigate the matter and contact **[Experian/Equifax/TransUnion]** to inform them that the disputed medical collection should be **[deleted/corrected]** as soon as possible. Thank you for your time and attention.

Sincerely,

**[Your Name]**

Enclosures: **[List documents you are enclosing (e.g., a copy of your credit report)]**