Your First Name	Last Name
Your Street Address	
City, ST	, ZIP Code
Date:	
Experian PO Box 4500 Allen, TX 75013	
Dear Experian,	
The purpose of this letter is to request the closing of the credit r To begin this process, I'm prother details about the deceased:	
Name of Deceased	
Date of Birth:	
Date of Death:	
Social Security Number:	
Most Recent Address:	
Street Address	
City, ST	, ZIP Code
If you need more information to complete my request, please do phone number.	on't hesitate to contact me at
Sincerely,	
Your Name	
Relationship to Deceased Spouse, etc.	
	Drudential