

Your First Name _____ Last Name _____

Your Street Address _____

City _____, ST _____, ZIP Code _____

Date: //

TransUnion LLC
PO Box 2000
Chester, PA 19016

Dear TransUnion,

The purpose of this letter is to request the closing of the credit record for the late Name of Deceased
_____. To begin this process, I'm providing you with a copy of the death certificate and
other 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 don't hesitate to contact me at
phone number. --

email address. _____

the address listed at the top of this letter.

Sincerely,

Your Name _____

Relationship to Deceased Spouse, etc. _____



Prudential