Name

Address

City, State, Zip Code

Dated:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Equifax Information Services LLC

P.O. Box 740123

Atlanta, GA 30374-0123

**Re: Security Freeze on My Child's Credit File**

**My Child's Social Security Number is: \_\_\_\_\_\_-\_\_\_\_-\_\_\_\_\_\_\_\_**

To Whom It May Concern:

 I am writing to request that you place a "freeze" on the credit file of my minor child. Please contact me and provide a PIN for me to unlock my child's report in the event that I need access to their credit file. I have included a copy of my child's birth certificate as proof of their age and my custody.

 If you have any questions or need additional information, please contact me at the address above. I have enclosed a copy of the following documents as proof of my identity.

* Driver’s License
* Social Security Card

Thank you for your anticipated assistance.

Very Truly Yours,

Your Name and Signature

Name

Address

City, State, Zip Code

Dated:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Experian**
P.O. Box 919
Allen, TX 75013

**Re: Security Freeze on My Child's Credit File**

**My Child's Social Security Number is: \_\_\_\_\_\_-\_\_\_\_-\_\_\_\_\_\_\_\_**

To Whom It May Concern:

 I am writing to request that you place a "freeze" on the credit file of my minor child. Please contact me and provide a PIN for me to unlock my child's report in the event that I need access to their credit file. I have included a copy of my child's birth certificate as proof of their age and my custody.

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* Driver’s License
* Social Security Card

Thank you for your anticipated assistance.

Very Truly Yours,

Your Name and Signature

Name

Address

City, State, Zip Code

Dated:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Innovis Consumer Assistance**
P.O. Box 495
Pittsburgh, PA 15230-0495

**Re: Security Freeze on My Child's Credit File**

**My Child's Social Security Number is: \_\_\_\_\_\_-\_\_\_\_-\_\_\_\_\_\_\_\_**

To Whom It May Concern:

 I am writing to request that you place a "freeze" on the credit file of my minor child. Please contact me and provide a PIN for me to unlock my child's report in the event that I need access to their credit file. I have included a copy of my child's birth certificate as proof of their age and my custody.

 If you have any questions or need additional information, please contact me at the address above. I have enclosed a copy of the following documents as proof of my identity.

* Driver’s License
* Social Security Card

Thank you for your anticipated assistance.

Very Truly Yours,

Your Name and Signature

Name

Address

City, State, Zip Code

Dated:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**TransUnion**
P.O. Box 505
Woodlyn, PA 19094

**Re: Security Freeze on My Child's Credit File**

**My Child's Social Security Number is: \_\_\_\_\_\_-\_\_\_\_-\_\_\_\_\_\_\_\_**

To Whom It May Concern:

 I am writing to request that you place a "freeze" on the credit file of my minor child. Please contact me and provide a PIN for me to unlock my child's report in the event that I need access to their credit file. I have included a copy of my child's birth certificate as proof of their age and my custody.

 If you have any questions or need additional information, please contact me at the address above. I have enclosed a copy of the following documents as proof of my identity.

* Driver’s License
* Social Security Card

Thank you for your anticipated assistance.

Very Truly Yours,

Your Name and Signature

Your Name

Your Address

City, State, Zip Code

Equifax Information Services LLC

Attn: Options

P.O. Box 740123

Atlanta, GA 30374-0123

Your Name

Your Address

City, State, Zip Code

**Experian**
Attn: Opt Out
P.O. Box 919
Allen, TX 75013

Your Name

Your Address

City, State, Zip Code

**Innovis Consumer Assistance**
P.O. Box 495
Pittsburgh, PA 15230-0495

Your Name

Your Address

City, State, Zip Code

**TransUnion**
Attn: Name Removal Option
P.O. Box 505
Woodlyn, PA 19094