

[DATE]

[Contact name]
[Licensee Name]
[Address]
[City, State, Zip]

RE: Advance Notice of Examination

Dear [Contact name]:

The States of [insert individual states] (hereinafter referred to as the “Examination States”) will be conducting a coordinated examination of [Licensee name] relative to the Licensee’s debt collection activities in the Examination States.

The proposed details for the examination are as follows:

Examination location: [Address]
On-site start date: [Date]
Review period: [Date to Date]

For the most recent year end, complete the table below with the total number of accounts and dollar amount of third party debt your company is attempting to collect in each of the specified states.

	Number of Accounts	Dollar amount of third party debt
Total for all States		
[insert state]		
[insert state]		
[insert state]		
[insert state]		
[insert state]		

Following receipt and review of the above requested information, you will receive notification regarding the specifics of the examination.

If you have any questions about the examination, please do not hesitate to contact me at [insert EIC phone number] or via email at [insert EIC email address].

Sincerely,

[EIC name]
[Name of State Agency]
Examination States, Examiner-in-Charge

CC: State Examiners
CC: any other applicable party
CC: