

Billing Inquiry for Medical Interpreter Services

Date: [Insert Date]

[Your Name]

[Your Address]

[City, State, Zip Code]

[Email Address]

[Phone Number]

[Billing Department/ Contact Person]

[Company Name]

[Company Address]

[City, State, Zip Code]

Dear [Billing Department/ Contact Person],

I hope this message finds you well. I am writing to inquire about a billing issue regarding the medical interpreter services provided on [insert date of service].

My account number is [insert account number] and I have noticed the following discrepancies:

- Service date: [insert date]
- Service description: [insert description]
- Amount billed: [insert amount]
- Assertion/issue: [insert specific concern]

I would appreciate your prompt attention to this matter and any clarification you can provide regarding the billing statement. If you require any additional information from my side, please don't hesitate to ask.

Thank you for your assistance.

Sincerely,

[Your Name]

[Your Title/ Position, if applicable]