Billing Adjustment Acceptance Confirmation

Date: [Insert Date]
To: [Customer Name]
Address: [Customer Address]
Dear [Customer Name],
We are writing to confirm the acceptance of your billing adjustment request regarding invoice #[Invoice Number]. After reviewing your request, we have made the necessary adjustments.
The following changes have been applied:
 Original Amount: [Original Amount] Adjusted Amount: [Adjusted Amount] Adjustment Reason: [Reason for Adjustment]
We appreciate your understanding and thank you for your continued partnership. If you have any further questions or concerns, please do not hesitate to reach out.
Sincerely,
[Your Name]
[Your Position]
[Your Company]
[Contact Information]