

Prescription Drug Rebate Program Payment Status Inquiry

Date: [Insert Date]

[Your Name]

[Your Address]

[City, State, Zip Code]

[Your Email Address]

[Your Phone Number]

[Recipient Name]

[Recipient Title]

[Company/Organization Name]

[Company Address]

[City, State, Zip Code]

Dear [Recipient Name],

I am writing to inquire about the status of my payment related to the Prescription Drug Rebate Program. My account details are as follows:

- Account Number: [Your Account Number]
- Submission Date: [Date of Submission]
- Reference Number: [Your Reference Number]

I would appreciate any updates you can provide regarding the processing of my rebate, as well as an estimated time frame for when I can expect to receive my payment.

Thank you for your attention to this matter. I look forward to your prompt response.

Sincerely,

[Your Name]