Towing Service Reimbursement Form

Date:
To: [Roadside Assistance Program Name]
Address:
City, State, Zip:
Dear [Program Administrator's Name],
I am writing to request reimbursement for towing services incurred on [Date of Service] due to a roadside assistance need. Below are the details of the service:
Towing Service Details
 Towing Company:
Attached to this letter are copies of the receipt and any other necessary documentation regarding this service for your review.
I appreciate your assistance in processing this reimbursement request. If you require any further information, please do not hesitate to contact me at [Your Phone Number] or [Your Email Address].
Thank you for your attention to this matter.
Sincerely,
[Your Name]
[Your Address]
[City, State, Zip]
[Your Phone Number]
[Your Email Address]