

Payment Reconciliation Request

Date: [Insert Date]

[Your Name]

[Your Position]

[Your Company Name]

[Your Company Address]

[City, State, Zip Code]

Email: [Your Email]

Phone: [Your Phone Number]

To: [Recipient's Name]

[Recipient's Position]

[Recipient's Company Name]

[Recipient's Company Address]

[City, State, Zip Code]

Dear [Recipient's Name],

I hope this message finds you well. I am writing to request a reconciliation of outstanding invoices listed below that appear to be unpaid on our records:

- Invoice Number: [Invoice Number 1] - Amount: [Amount] - Due Date: [Due Date]
- Invoice Number: [Invoice Number 2] - Amount: [Amount] - Due Date: [Due Date]
- Invoice Number: [Invoice Number 3] - Amount: [Amount] - Due Date: [Due Date]

We would appreciate your assistance in reviewing these invoices to confirm the current status of payments. Please let us know if there are any discrepancies or if further documentation is required.

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

Sincerely,

[Your Name]

[Your Position]

[Your Company Name]