## Letter of Assertion for Return of Overpaid Charges

[Your Name]

[Your Address] [City, State, Zip Code] [Email Address] [Phone Number]

[Date]

[Recipient's Name]

[Company's Name] [Company's Address] [City, State, Zip Code]

Dear [Recipient's Name],

I am writing to formally assert my request for the return of overpaid charges that were applied to my account, [Your Account Number]. Upon reviewing my billing statements, I have identified discrepancies that amount to an overpayment of [amount overpaid].

Details of the overpayment are as follows:

• Date of charge: [Date]

Original charge: [Original Amount]Correct charge: [Correct Amount]Difference: [Amount Overpaid]

I kindly request that you investigate this matter and return the overpaid amount to my account within [time frame, e.g., 14 days] of this letter. Attached are copies of my billing statements and any relevant documentation supporting my claim.

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

Sincerely,

[Your Name]