

Letter of Demand for Reimbursement

Date: [Insert Date]

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

[Recipient Name]
[Company Name]
[Company Address]
[City, State, Zip Code]

Dear [Recipient Name],

I am writing to formally request a reimbursement for an overcharge that occurred on my recent bill dated [Insert Bill Date] for account number [Insert Account Number]. Upon reviewing the billing statement, I noticed that I was incorrectly charged [Insert Incorrect Amount] instead of the correct amount of [Insert Correct Amount].

Attached to this letter, you will find a copy of the billing statement highlighting the discrepancy as well as any relevant supporting documents.

I kindly ask that you process this reimbursement at your earliest convenience. Should you require any further information or documentation, please do not hesitate to contact me.

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

Sincerely,

[Your Name]