

Letter of Demand for Reimbursement

[Your Name]

[Your Address]

[City, State, ZIP Code]

[Email Address]

[Phone Number]

[Date]

[Recipient's Name]

[Recipient's Title]

[Company Name]

[Company Address]

[City, State, ZIP Code]

Subject: Demand for Reimbursement of Account Overpayment

Dear [Recipient's Name],

I am writing to formally request reimbursement for an overpayment made to my account ([Your Account Number]) in the amount of [Overpayment Amount]. This overpayment occurred on [Date of Overpayment] and I have attached the relevant documentation for your reference.

According to my records, the overpayment was due to [Brief Explanation of Overpayment Reason]. Despite my previous attempts to resolve this matter, I have yet to receive the funds. I expect a reimbursement of the total overpaid amount in a timely manner.

Please process this request and initiate the reimbursement to my account as soon as possible, but no later than [Specify a Deadline, e.g., 14 days from the date of this letter]. If I do not receive the reimbursement by this date, I will have to consider taking further action.

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

Sincerely,

[Your Name]