

Fiscal Claim Dispute Notification

Date: [Insert Date]

Recipient Name
Recipient Address
City, State, Zip Code

Dear [Recipient Name],

Subject: Dispute of Fiscal Claim - [Claim Number]

I am writing to formally dispute the fiscal claim referenced above, which was received on [Date Claim Received]. After careful review, I believe that the claims made in this notice do not accurately reflect [briefly explain the reason for dispute].

Details of the Disputed Claim:

- Claim Amount: [Insert Amount]
- Date of Claim: [Insert Date]
- Description of Claim: [Insert Description]

In support of my dispute, I have attached [describe any supporting documents] that provide additional context to my situation.

I request that this dispute be investigated promptly, and I would appreciate a response by [Insert Deadline]. Please feel free to contact me at [Your Phone Number] or [Your Email Address] should you require further information.

Thank you for your attention to this matter.

Sincerely,

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