

# Letter of Appeal

Date: [Insert Date]

[Your Name]

[Your Address]

[City, State, Zip Code]

[Email Address]

[Phone Number]

[Tax Authority Name]

[Tax Authority Address]

[City, State, Zip Code]

Subject: Appeal Against Tax Assessment Decision - [Assessment Year]

Dear [Tax Authority's Name or Title],

I am writing to formally appeal the tax assessment decision made on [insert date of assessment] regarding my tax return for the year [insert assessment year]. My tax identification number is [insert your tax ID number].

I believe that the assessment made was based on [briefly explain the reason you believe the assessment is incorrect]. Enclosed with this letter are the supporting documents that substantiate my claims.

I kindly request a review of my case, as I believe that the information provided will clarify the situation. I appreciate your attention to this matter and look forward to your prompt response.

Thank you for considering my appeal.

Sincerely,

[Your Name]

[Your Signature (if sending a hard copy)]