

Monthly Tax Payment Slip Request

Date: [Insert Date]

[Your Name]

[Your Address]

[City, State, ZIP Code]

[Email Address]

[Phone Number]

To,

[Tax Authority's Name]

[Tax Authority's Address]

[City, State, ZIP Code]

Subject: Request for Monthly Tax Payment Slip

Dear [Tax Authority's Name],

I hope this letter finds you well. I am writing to formally request a copy of my monthly tax payment slip for the month of [Insert Month/Year].

My details are as follows:

- Taxpayer ID: [Your Taxpayer ID]
- Name: [Your Full Name]
- Address: [Your Address]
- Contact Number: [Your Phone Number]

The payment slip is needed for [reason for the request, e.g., personal record, accounting purposes]. I would appreciate it if you could send the document at your earliest convenience.

Thank you for your assistance in this matter.

Sincerely,

[Your Signature (if sending by mail)]

[Your Printed Name]