

Electronic Payment Authorization Verification

Date: [Insert Date]

To: [Recipient Name]

[Recipient Address]

[City, State, Zip Code]

Dear [Recipient Name],

This letter serves as verification of the electronic payment authorization for the following transaction:

- **Transaction ID:** [Insert Transaction ID]
- **Amount:** [Insert Amount]
- **Date of Transaction:** [Insert Transaction Date]
- **Authorized By:** [Insert Authorizing Person's Name]

Please confirm that the above details are accurate and that the payment has been successfully processed. If there are any discrepancies, contact us immediately at [Insert Contact Information].

Thank you for your prompt attention to this matter.

Sincerely,

[Your Name]

[Your Title]

[Your Company]

[Your Contact Information]