

Letter of Acceptance of Payment Discrepancy

Date: [Insert Date]

[Your Name]
[Your Position]
[Your Company]
[Company Address]
[City, State, Zip Code]

[Recipient Name]
[Recipient Position]
[Recipient Company]
[Company Address]
[City, State, Zip Code]

Dear [Recipient Name],

We acknowledge receipt of your notification concerning the payment discrepancy related to invoice #[Invoice Number] dated [Invoice Date]. After reviewing the details, we find that there were indeed discrepancies in the payment received.

We appreciate your prompt communication regarding this matter and would like to confirm our acceptance of the discrepancy. We are currently taking steps to rectify this issue and will ensure that the adjusted payment is processed as soon as possible.

Thank you for your understanding and cooperation in this matter. Should you have any further questions or require additional information, please do not hesitate to contact us.

Sincerely,

[Your Name]
[Your Position]
[Your Company]
[Your Phone Number]
[Your Email Address]