

# Invoice Cancellation Verification

Date: [Insert Date]

To: [Recipient's Name]

[Recipient's Address]

[City, State, Zip Code]

Dear [Recipient's Name],

We are writing to confirm the cancellation of the following invoice:

<b>Invoice Number</b>	<b>Date of Invoice</b>	<b>Amount</b>
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[Invoice Number]	[Date]	[Amount]
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This cancellation was processed on [Cancellation Date] as per your request. If you have any questions or require further assistance, please do not hesitate to contact us.

Thank you for your understanding.

Sincerely,

[Your Name]

[Your Position]

[Your Company Name]

[Your Contact Information]