

Reimbursement Request for Overpayment

Recipient Name

Recipient Title

Company Name

Company Address

City, State, Zip Code

Date: [Insert Date]

Dear [Recipient Name],

I hope this message finds you well. I am writing to formally request reimbursement for an overpayment made on [invoice/receipt number] dated [date of payment]. Upon reviewing my records, I have identified that I inadvertently paid [amount overpaid] instead of the correct amount of [correct amount].

The details of the transaction are as follows:

- Payment Date: [Insert Date]
- Original Amount: [Insert Amount]
- Amount Paid: [Insert Amount Paid]
- Overpayment Amount: [Insert Amount Overpaid]

Enclosed are copies of relevant documentation including the invoice, payment confirmation, and any other supporting documents.

I kindly request that you process this reimbursement at your earliest convenience. Please let me know if you require any additional information or documentation to facilitate this request.

Thank you for your attention to this matter. I look forward to your prompt response.

Sincerely,

[Your Name]

[Your Title]

[Your Company Name]

[Your Address]

[City, State, Zip Code]

[Your Email Address]

[Your Phone Number]