

REFUND DEMAND LETTER

_____ (Payee/ Representative Name & Address)

_____ (Payor/ Representative Name & Address)

Date: _____, 20____

Dear _____,

This letter is being sent [on behalf of _____] to formally request the refund of \$_____ for the following: _____.

Please remit the full amount due to: _____.

If full payment is not remitted by _____, 20____, further legal action may be taken against you. In addition to the amount requested herein, filing fees, attorney's fees, and any other costs associated with obtaining the amount owed may be pursued.

Hopefully this matter can be resolved as soon as possible.

Sincerely,

_____ (Payee's Signature)

