

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

[Date]

[Name of Contact Person/Department]
[Organization/Company Name]
[Address]

RE: Notice of Overpayment Dispute - [Account or Employee ID Number]

Dear [Name of Contact Person or Department],

I am writing to formally dispute the notice of overpayment I received on [Date of Notice], which states that I owe a balance of \$[Amount] for the period of [Start Date] to [End Date].

I am disputing this claim for the following reason(s):

- [Reason 1: e.g., The calculation of the overpayment is incorrect.]
- [Reason 2: e.g., I did not receive the funds mentioned in the notice.]
- [Reason 3: e.g., The overpayment was caused by an administrative error and recovery would cause financial hardship.]

Attached are the documents supporting my position, including [list documents, e.g., pay stubs, bank statements, or previous correspondence].

I request that you review my account and provide a detailed itemization of how this overpayment was calculated. Until this matter is resolved, I request that any collection efforts or automatic deductions be suspended.

Please acknowledge receipt of this letter and notify me of the steps being taken to investigate this dispute. I look forward to resolving this matter promptly.

Sincerely,

[Your Signature]

[Your Printed Name]