

[Your Name]  
[Your Address]  
[City, State, ZIP Code]  
[Email Address]  
[Phone Number]  
[Date]

Billing Department

[Hospital Name]  
[Hospital Address]  
[City, State, ZIP Code]

Dear Billing Department,

Subject: Inquiry Regarding Hospital Bill

I am writing to formally inquire about the bill I received dated [insert bill date], with reference number [insert reference number].

The details of the bill are as follows:

- Patient Name: [Patient Name]
- Patient Account Number: [Account Number]
- Date of Service: [Date of Service]
- Total Amount Due: [Total Amount]

I kindly request a detailed breakdown of the charges, including any payments received and adjustments made. Additionally, I would appreciate clarification on [specific charge or concern, if applicable].

Please let me know if you require any further information from my side to facilitate this inquiry. I look forward to your prompt response.

Thank you for your assistance.

Sincerely,  
[Your Name]