

[Your Name]  
[Your Title]  
[Your Organization]  
[Your Address]  
[City, State, Zip Code]  
[Email Address]  
[Phone Number]  
[Date]

[Recipient's Name]  
[Recipient's Title]  
[Recipient's Organization]  
[Recipient's Address]  
[City, State, Zip Code]

Subject: GGT Payment Adjustment Request

Dear [Recipient's Name],

I am writing to formally request a review and adjustment of the GGT payment for [specific period or invoice number]. Upon reviewing the account details, the following discrepancies have been noted:

1. [Briefly describe the first discrepancy or issue]
2. [Briefly describe the second discrepancy or issue, if applicable]
3. [Continue as necessary]

In accordance with your policies, I believe that a thorough review of the attached documentation will confirm our findings. The attachment includes:

- [List of attached documents, such as invoices, statements, etc.]

I kindly ask for your prompt attention to this matter and look forward to your response. Should you require any further information, please do not hesitate to contact me at [your phone number] or [your email address].

Thank you for your assistance.

Sincerely,

[Your Name]  
[Your Title]  
[Your Organization]