



**BODY SHOP SHORT PAYMENT REQUEST**

*FROM:* \_\_\_\_\_; (*REPAIR FIRM*)

*TO:* \_\_\_\_\_; (*ESTIMATING SUPERVISOR / ESTIMATOR*)

*Date:* \_\_\_\_\_ *Shop Reference #:* \_\_\_\_\_

*Claim Number:* \_\_\_\_\_ *Registered Acct #:* \_\_\_\_\_

*Estimator:* \_\_\_\_\_ *Contact Person:* \_\_\_\_\_

*Adjuster:* \_\_\_\_\_ *Repair Firm Ph#:* \_\_\_\_\_

*Repair Firm Fax #:* \_\_\_\_\_

**SHOPS EXPLANATION OF SHORT PAYMENT:**

Line # \_\_\_\_\_

Line # \_\_\_\_\_

Line # \_\_\_\_\_

Line # \_\_\_\_\_

The above noted Body Shop has informed us that they were short paid \$\_\_\_\_\_, from the attached estimate.

**MPI RESPONSE:**

Explanation:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

After reviewing the account, please pay \$\_\_\_\_\_.

\_\_\_\_\_  
APPROVED SIGNATURE BY

THE ESTIMATOR/SUPERVISOR/PARTS COORDINATOR