

**Date:** [Insert Date]

**To:** [Vendor Name]

**Attention:** [Contact Person/Account Manager]

**Address:** [Vendor Address]

**Subject: Notification of Updated ATM Replenishment Schedule**

Dear [Contact Name],

This letter serves as official notification regarding the replenishment schedule for the ATM(s) located at [Insert Location/Branch Name].

To ensure optimal cash availability and security, please note the following designated replenishment times effective [Insert Effective Date]:

- **Replenishment Days:** [e.g., Monday, Wednesday, Friday]
- **Authorized Time Window:** [e.g., 9:00 AM to 11:00 AM]
- **Emergency/Ad-hoc Requests:** [Insert instructions for off-schedule service]

Please ensure that your service teams are informed of these specific hours. Access to the machines outside of these designated windows may result in delays or restricted entry to the premises.

If there are any operational conflicts regarding this schedule, please contact [Department/Name] at [Phone Number] or [Email Address] by [Insert Deadline Date] to discuss necessary adjustments.

Thank you for your continued partnership and cooperation.

Sincerely,

[Your Name]

[Your Job Title]

[Your Company Name]