

Patient Payment Reminder

Dear [Patient's Name],

We hope this message finds you well. This is a friendly reminder regarding your outstanding prescription fees for the medication prescribed on [Date of Prescription].

The total amount due is: **[\$Amount]**.

Kindly make the payment by [Due Date] to avoid any interruption in your medication service. You can make the payment through the following methods:

- Online via our patient portal
- By phone with a credit card
- In-person at our office

If you have any questions or require assistance, please do not hesitate to contact us at [Phone Number] or [Email Address].

Thank you for your attention to this matter.

Sincerely,

[Your Practice Name]

[Your Practice Address]

[Your Practice Phone Number]