

Final Reminder for Medical Expenses

Date: [Insert Date]

To,

[Recipient's Name]

[Recipient's Address]

Dear [Recipient's Name],

This is a final reminder for the outstanding medical expenses incurred on [Insert Date of Service]. As of today, the total amount due is [Insert Amount].

Despite previous reminders, we have yet to receive payment. Please note that this debt is now overdue, and we kindly ask that you make arrangements for payment within the next [Insert Time Frame]. Failure to do so may result in further action.

We appreciate your immediate attention to this matter.

If you have already sent payment, please disregard this notice.

Thank you for your understanding.

Sincerely,

[Your Name]

[Your Title]

[Your Organization]

[Contact Information]