

***DOCUMENT OVERVIEW:** It is important that your office politely and effectively communicate with patients regarding balances. This document may be used early in the patient billing cycle as a reminder of outstanding fees for services rendered. Courteous and timely patient billing procedures often result in timely payment and a reduced accounts receivable.*

[date]

[address]

Dear [name]:

A review of our unpaid accounts indicates that you have an overdue balance of [\$—].

You may use the enclosed preaddressed stamped envelope to send us a check or to provide credit card information to pay off the outstanding balance. Alternatively, please contact us at [telephone number] and provide us your credit card information over the telephone in order to transfer your balance.

If you have any questions, please call. We value you as a patient.

Sincerely,

[name]

Enclosure

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