

<insert current date>

ATTN: <insert contact name>
<Customer Name>
<Customer Address>
<City, State, Zip Code>

Re: Unpaid Invoice(s)

A review of your account with *Insert Company Name* shows the following invoice(s) is/are partially/wholly unpaid:

<u>Invoice No.</u>	<u>Invoice Date</u>	<u>P.O. No.</u>	<u>Amount or Balance Due</u>
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Please review your records. If payment has already been made, please return a copy of this letter, indicating check number, date and amount of payment. If payment has not been made and no problem exists with this billing, please process for immediate payment. If you have any questions or need additional information, you may contact me at: <insert contact phone/fax numbers>. Thank you.

Sincerely,

<Collector's Name>
<Collector's title if any>