

[Clinic Name]
[Clinic Address]
[Phone Number]
[Date]

[Patient Name]
[Patient Address]

Subject: Friendly Reminder: Outstanding Balance for [Patient Name]

Dear [Patient Name],

We hope you are doing well. This is a friendly reminder regarding an outstanding balance on your account for services provided on [Date of Service].

According to our records, the remaining balance is \$[Amount Due].

We kindly ask that you settle this payment at your earliest convenience. You can make a payment by:

- Paying online through our portal at [Link]
- Calling our office at [Phone Number] to pay by card
- Mailing a check to the address listed above

If you have already sent your payment, please disregard this notice. If you have any questions regarding your bill or if you need to discuss a payment plan, please do not hesitate to contact our billing department.

Thank you for choosing [Clinic Name] for your healthcare needs.

Sincerely,

[Your Name/Billing Department]
[Clinic Name]