

**Date:** [Insert Date]

**To:** [Attorney or Law Firm Name]

[Address Line 1]

[City, State, Zip Code]

**From:** [Your Name or Company Name]

[Your Address]

[Phone Number]

[Email Address]

**RE: Payment Plan Agreement for Invoice(s) # [Insert Invoice Numbers]**

Dear [Name of Contact Person],

This letter serves as a formal agreement regarding the outstanding balance for legal services provided under the aforementioned invoice(s). As of [Date], the total outstanding balance is \$[Total Amount].

Due to current financial constraints, I am requesting to settle this balance through a structured payment plan. I propose the following terms:

- **Down Payment:** A one-time payment of \$[Amount] to be paid by [Date].
- **Installment Amount:** Subsequent monthly payments of \$[Amount].
- **Frequency:** Payments will be made on the [Day, e.g., 1st or 15th] of each month.
- **Start Date:** The first installment will begin on [Date].
- **End Date:** The final payment will be made on or before [Date].

Payments will be made via [Method of Payment, e.g., Check, Bank Transfer, Credit Card].

I acknowledge that I am responsible for the full balance. If I anticipate a delay in any payment, I will notify your office immediately to discuss a resolution. I understand that failure to adhere to this schedule may result in further collection actions.

Please indicate your acceptance of these terms by signing below and returning a copy of this letter to me.

Sincerely,

[Your Signature]

[Your Printed Name]

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**Accepted By:**

Signature: \_\_\_\_\_

Name/Title: \_\_\_\_\_

Date: \_\_\_\_\_