

Date: [Insert Date]

To: [Debtor Name]

Address: [Debtor Address]

City, State, Zip: [City, State, Zip]

RE: FINAL DEMAND FOR PAYMENT

Account Number: [Insert Account Number]

Total Amount Overdue: \$[Insert Amount]

Dear [Debtor Name],

This letter serves as a formal final demand for the payment of your delinquent credit card balance. Despite our previous attempts to contact you via mail and telephone, your account remains seriously past due.

As of today, your total outstanding balance is \$[Insert Amount]. This includes the principal balance, accrued interest, and late fees.

Failure to remit the full payment or contact our office to establish a mutually agreeable payment plan within [Insert Number, e.g., 7 or 10] business days from the date of this letter will result in further action. Such actions may include, but are not limited to:

- Reporting your delinquency to national credit bureaus.
- Closing your credit account permanently.
- Referring your account to an external collection agency.
- Initiating legal proceedings to recover the debt.

Please send your payment immediately to the address listed below or contact our Billing Department at [Insert Phone Number] to discuss your options.

Payment Address:

[Insert Company Name]

[Insert Payment Address]

[Insert City, State, Zip]

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

Sincerely,

[Your Name/Department Name]

[Company Name]