FINAL DEMAND FOR PAYMENT

Date: [Insert Date]
Account Number: [Insert Account Number]
Outstanding Balance: [Insert Amount]

To: [Insert Authorized Representative Name]
[Insert Corporate Entity Name]
[Insert Business Address]
[Insert City, State, Zip Code]

Dear [Insert Name],

This letter serves as a formal and final demand for the immediate repayment of the overdrawn balance on the above-referenced corporate account held with [Insert Financial Institution Name].

Despite previous notifications sent on [Insert Date(s) of previous notices], your account remains in a negative status. As of the date of this letter, the total amount required to bring the account to a zero balance is **[Insert Total Amount]**. This figure includes all applicable overdraft fees and interest charges accrued to date.

Please be advised that your account must be settled in full within [Insert Number, e.g., 7] business days from the date of this notice. Payment can be made via [Insert Payment Method, e.g., wire transfer, certified check, or branch deposit].

Failure to remit the full outstanding balance by [Insert Deadline Date] will result in the following actions:

- Permanent closure of the corporate account.
- Reporting of this delinquency to commercial credit reporting agencies and ChexSystems.
- Referral of this matter to an external collection agency or legal counsel for recovery.

If you have already sent payment, please disregard this notice. If you wish to discuss a repayment schedule, please contact our Recovery Department immediately at [Insert Phone Number].

Sincerely,

[Insert Name/Department]
[Insert Financial Institution Name]
[Insert Contact Information]