

FINAL NOTICE OF RIGHT TO CURE OVERDRAFT BALANCE

Date: [Insert Date]

To:

[Customer Name]

[Customer Address]

[City, State, Zip Code]

RE: Account Number ending in [Last 4 Digits of Account Number]

Dear [Customer Name],

This is a formal notice regarding the overdraft status of your account. As of [Insert Date], your account remains overdrawn by the amount of **[\$[Insert Total Amount]]**.

Our records indicate that previous attempts to notify you regarding this negative balance have gone unanswered. You have a right to cure this default by paying the full amount listed above on or before **[Insert Deadline Date]**.

Required Action:

To bring your account back into good standing, please choose one of the following options:

- Deposit funds via an ATM or mobile app.
- Transfer funds from another linked account.
- Visit a local branch to make a cash or certified check deposit.

Consequences of Non-Payment:

If you fail to cure this overdraft by the date specified above, we may take the following actions:

- Permanent closure of your account.
- Reporting the default to credit reporting agencies and specialized bureaus (such as ChexSystems).
- Referral of your account to an external collection agency.
- Legal action to recover the debt, including applicable fees and interest.

If you believe there is an error or if you are experiencing financial hardship and need to discuss a payment plan, please contact our Collections Department immediately at [Insert Phone Number].

Sincerely,

[Authorized Representative Name]

[Financial Institution Name]

[Department Name]