[Your Name/Company Name]
[Your Address]
[City, State, Zip Code]
[Phone Number]
[Email Address]

[Date]

[Client Name]
[Client Company Name]
[Client Address]
[City, State, Zip Code]

RE: NOTICE OF INTENT TO SUSPEND PROFESSIONAL SERVICES

Dear [Client Name],

This letter serves as formal notice regarding the outstanding balance on your account for professional services rendered under the agreement dated [Contract Date].

As of [Current Date], your account is past due in the amount of $[Total Amount Owed]. This balance relates to the following invoice(s):

- Invoice #[Number] - [Date] - $[Amount]
- Invoice #[Number] - [Date] - $[Amount]

Despite previous reminders, we have not received payment or a formal proposal for a payment plan. Please be advised that if payment is not received in full by [Deadline Date], we will formally suspend all professional services and work-related activities effective immediately.

During a suspension of services:

- All active project work will cease.
- Access to [Software/Portals/Deliverables] may be restricted.
- Deadlines and milestones will be postponed indefinitely.

We value our professional relationship and wish to avoid this course of action. To prevent the suspension of services, please submit payment via [Payment Method] or contact us at [Phone Number] to resolve this matter immediately.

Sincerely,

[Your Signature]

[Your Printed Name]
[Your Title]