

Health USA

125 MAIN STREET
STE 118
SERVICE CITY MA 99999
RETURN SERVICE REQUESTED

For Billing Inquiries Call:
(999)999-9999
Visit OurWebSiteURL.com

Please complete payment information.

Chart Number	Statement Date	Account Balance	Amount Due
MS3	05/20/20xx	x.00	x.00
CREDIT CARD	Select Card <input type="checkbox"/> Visa <input type="checkbox"/> Mastercard <input type="checkbox"/> Discover <input type="checkbox"/> American Express		
Card No.	Exp. Date		3-4 Digit Security Code
Signature	Check No.	Amount Paid	
CHECK			



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SALLY SMITH
16 ELM ST
SERVICE CITY MA 99999

Make checks
payable to:

HEALTH USA
125 MAIN ST STE 118
SERVICE CITY MA 99999

Check if your billing information has changed
Provide update(s) above or on the reverse side.

Please detach and return top portion with your payment

Statement Detail

Statement Date 5/20/20xx Chart Number MS3

SALLY SMITH

Your account is currently over 120 days past due. We have sent you 2 past statements but have not received your full payment or response.

The amount indicated below as Payment Due indicates the amount outstanding. Please remit payment in full immediately.

YOUR ACCOUNT WILL BE TURNED OVER FOR COLLECTIONS if we don't receive payment in full within 15 days of this Notice Date or you have not contacted us within 15 days of this Notice Date.

Thank you for taking care of this matter.

Health USA

Account Summary	Previous Balance	New Charges	Payments & Credits	Adjustments
	x.00	x.00	x.00	x.00

Insurance Pending	Amount Due
x.00	x.00