January 6, 2025	Sent via [<mark>email/fax</mark>] to	/USPS	
[Doctor] [Clinic Name] [Address Line 1] [Address Line 2]			
Re: [Your Name], DOB			
Dear <mark>[Dr. Name]</mark> ,			
I was involved in a collision on	in which I was not at fault		
yet aware of the liability insurance li place at the time of the incident. I in	ough (carrier). imits, the carrier has confirmed that contend to pursue my claims against ce my treatment is complete and I have	overage was in	
possible. / I am currently uncertain	licy, and I will pursue these benefits to	(carrier)	
proceedings, I will ensure that my b the treatment provided and your par	I for my damages, whether through set alance with your office is addressed in tience in holding my account for future	consideration of payment.	Commented [AV1]: Expect to have to make small monthly "good faith payments" - they may still hold to bulk of your balance if you can negotiate with them
to discuss my case further. Thank you	nhave any questions regarding this lett ou for your attention to this matter.	er or if you wish	effectively.
Sincerely,			
[Your Name] [Your Contact Information]			