

EXTENDED DAY PROGRAM
Notice of Delinquent Account



Attn: Greg Belfour
P.O. Box 1930
Lake Charles, La 70602-1930
(337) 439-8315
Fax (337) 436-5606

DATE: _____

RE: _____

Dear Mr. Belfour,

This letter is to notify you of a delinquent Extended Day account balance for the above referenced individual totaling \$_____.

_____ has been notified of his/her outstanding balance and has failed to remit payment. You will find attached copies of the Extended Day statements that have been provided to _____ on a monthly basis. A copy of the Delinquent Account Notice that was sent via certified mail is included for your reference.

I am requesting that you take necessary action in order to collect payment for this delinquent account. If you have any questions, please contact _____ at _____.

Thank you in advance for your assistance in this matter.

Sincerely,

Principal