

Legal Note: The Documents here are provided for your information and that of your immediate family only. You are not permitted to copy any document provided to you. Each of these Documents provided are intended as general assistance in simple legal matters only. No document is intended to be used for any item, transaction, or other matter, where the total value of the item, transaction or matter is worth more than \$ 5,000.00. You are not authorized to use any document for any transaction which is in excess of \$ 5,000.00 in value or is not a simple matter. As a guideline to the meaning of simple, consider the following: if you can complete the document without any questions, it is likely a simple matter. However, if you need to ask any questions, you should consult with your Plan attorney. Do not speculate about completion of the blanks in this matter.

The information provided in the documents, and the instructions provided with each document are not intended to constitute legal advice. These documents are intended to assist consumers in protecting themselves in certain simple transactions, without incurring expensive attorneys fees. If you need legal advice, Plan Attorneys will be happy to provide a free legal consultation, at no cost, to you as a Plan member. Understand that if you contact a Plan Attorney, he/she may not advise you as to how to complete your documents. They may only be retained to prepare documents for you which they deem to be proper in your situation.

Certain documents can be completed with either a pen or a typewriter, unless indicated otherwise in the specific instructions. **You should not make changes or alterations to any documents, once you have completed the document.** You must complete a new document fully, even if you wish to make any changes, even a small change. If you make any changes to a document, you cannot be sure that the change conforms to legal requirements. For example, changes to a will, in some circumstances, may void the entire will, even if you intended to make the changes. Thus, it is a safer practice to make a new document, if you intend to make any changes.

If there are blanks which are not used or which contain no information, place an X, or a line through the blank. This ensures that no person can make unauthorized modifications to a document, by simply completing the blanks, and changing the entire crux of the document.

Certain documents may require a notary. Notaries are certified by each state, and can only operate in the states in which they are licensed to operate. An invalid notary may invalidate your document. Notaries serve the purpose of verifying that the signature of the person signing the document, is in fact, the person claiming to have signed the document. Certain institutions require a notary, even when state law does not. Be sure to check with the parties with whom you are dealing to see if they will require a notary. Banks often require notaries.

If you believe that you must record a document, you should consult with a Plan Attorney. No document provided here is intended for recording, and any such document must be prepared by a Plan Attorney. We have not included certain documents, despite repeated requests, because these documents require the skill and expertise of an attorney. These include trusts, deeds, Mortgages, Escrow Agreements and other documents. Always consult a Plan Attorney before drafting one of these documents on your own.

Date

Name  
Title  
Company Name  
Address  
City, State Zip

**SENT VIA CERTIFIED MAIL**

Your Name:  
Claim No.: [Add if known]  
Amount: \$

Dear Mr./Ms.:

We are in receipt of your letter which you sent to us dated \_\_\_\_\_, 20\_\_ and which was received on \_\_\_\_\_, 20\_\_.

Quite simply, we do not know what services were rendered to [me, or my spouse, daughter, etc.] during [his/her] stay in your hospital. The statement for services which you sent does not adequately identify which services were rendered and which charges resulted. As such, until we can obtain a more detailed statement of charges, we are unable to pay this balance.

[Optional, if needed] If your firm is a collection agency for another firm, we would appreciate knowing who the firm is and when such a claim arose. We have no knowledge that any debt is owed which is not paid, and thus, we dispute any such debt in the amount set forth in your letter. **We are adamant, based on the information which we have, that we do not owe your firm any money for any debt whatsoever.**

As you know, any debt which is disputed can create serious credit standing problems. We take our credit report and standing very seriously and we will vigorously protect our interest, should this debt be pursued by your firm without the additional information requested.

Sincerely,

By \_\_\_\_\_  
[Your Name]

[Enclose a copy of their bill or statement for their easier reference]