NOTIFICATION OF OVERDUE ACCOUNT without/with intervention

☐ 逾期帳款負面訊息通知　　☐ 出險並啟動催收通知

DATE OF NOTIFICATION (通知日期)**:**

Debtor's Info	
Company Name U.S. Electronics Inc CRS No. ADDRESS Tel:	Contact Information 聯絡人員 Title : First Name: Last Name: Email: Phone:
ADDRESS FOR INVOICES (If different from above) 發票地址 (若與上述不同)	**INVOICES ISSUED BY** (If different from above) 發票之簽發公司名稱 (若與上述不同)
Insured's Info	
Company Name: DIVA Laboratories, Ltd. Policy No.: Address: Tel:	Contact Person Title: First Name: Last Name: Email: Phone:

Overdue Amount (逾期金額)				Payments or Credit Notes (*) 付款或票據		Remarks 備註
Invoice Reference 發票號碼	Invoice Date 發票日期	Settlement Date 到期日	Amount 金額 (Currency 幣別:US)	Amount 金額 (Currency 幣別:)	Date 日期	
KV28041217	2025/4/17	2025/7/31	1,320			
RV27908450	2025/9/1	2025/12/31	328			
8000010420	2025/3/25	2025/6/30	148,150.36	52,500	2025/12/8	
8000010710	2025/6/4	2025/9/30	36,360			
		Total Amount	186,158.36	52,500		
		Net Debt	133,658.36	(*) If a credit note is concerned state this in 若以票據清償時，請於備註欄內說明		

INFORMATION TO BE PROVIDED BY THE INSURED **請被保險人提供下列資訊**

REASON FOR NON PAYMENT 未付款原因: 買方告知因近期該公司持有者變更，在更換匯款銀行帳戶時遇到了一些問題，導致買方與其客戶會計部門間需協調更新銀行資訊，進而需花費大量時間而延誤付款，但至今仍無法確實告知能付清逾期款項的時間點為何?

IS THE CLAIM DISPUTED 該帳款有無爭議: YES 有:_____ NO 無: 無

STEPS TAKEN BY INSURED TO EFFECT RECOVERY 被保險人採取之催收方式: 通訊連繫

IS THE CLAIM SECURED (RETENTION OF TITLE, PERSONAL OR BANK GUARANTEE)

該債權是否採取保全動作(保留貨物所有權，提供個人擔保或銀行保證)_____

CONTACT PERSON 買方窗口聯絡人: Angel Chiang Tel 電話: 02-2226-8631#162

重要事項: **本保險契約等待期間係依本公司接獲貴公司逾期帳款通知暨催收請求之日起算**。貴公司現在是否請求催收? ■ 是　☐ 否

_____

申請人簽名及公司用印 Applicant's signature & official company chop