

Date: [Current Date]
From: [Your Name/Company Name]
Address: [Your Address]
Phone: [Your Phone Number]

To: [Recipient Name]
Address: [Recipient Address]

RE: NOTICE OF DISHONORED CHECK

Dear [Recipient Name],

This letter serves as formal notice that check number **[Check Number]**, dated **[Check Date]**, in the amount of **[\$Amount]**, made payable to **[Your Name/Company Name]**, was returned by your financial institution, **[Bank Name]**, marked "Insufficient Funds" or "Non-Sufficient Funds" (NSF).

Pursuant to state law, demand is hereby made for payment of the full amount of the check, plus a returned check fee of **[\$Fee Amount]**, for a total balance due of **[\$Total Amount]**.

Please remit the total amount within **[Number of Days, e.g., 30]** days from the date of this notice. Payment must be made via cash, cashier's check, or money order. Personal checks will not be accepted for this repayment.

Failure to resolve this matter within the specified timeframe may result in further legal action, which may include the filing of a civil suit or referral to local law enforcement/the District Attorney's office for criminal prosecution.

Please guide your payment to the address listed at the top of this letter. If you have already sent payment, please disregard this notice.

Sincerely,

[Your Signature]
[Your Printed Name]