

**DATE:** [Current Date]

**TO:**

[Name of Payor]

[Address]

[City, State, Zip Code]

**RE: NOTICE OF DISHONORED CHECK AND FORMAL DEMAND FOR PAYMENT**

Dear [Name of Payor],

This letter serves as formal notice that check number [Check Number], dated [Date on Check], in the amount of \$[Amount], drawn on [Name of Bank] and made payable to [Your Name or Business Name], was returned by the financial institution unpaid and marked: [Reason, e.g., Insufficient Funds / Account Closed].

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

Please remit the total amount due in the form of cash, certified check, or money order to the following address within [Number, e.g., 10 or 30] days of receipt of this notice:

[Your Name/Company Name]

[Your Mailing Address]

[City, State, Zip Code]

Failure to settle this debt within the timeframe specified may result in further legal action, including but not limited to, the filing of a civil lawsuit to recover the amount of the check, court costs, attorney fees, and any treble damages permitted by law. We also reserve the right to report this matter to local law enforcement authorities.

Please govern yourself accordingly.

Sincerely,

[Your Signature]

[Your Printed Name]

[Your Phone Number]