

DATE: [Current Date]

TO:

[Name of Issuer]

[Address]

[City, State, Zip Code]

RE: NOTICE OF DISHONORED CHECK AND DEMAND FOR PAYMENT

Dear [Name of Issuer],

This letter serves as formal notice that the following check issued by you has been returned by the financial institution unpaid:

- **Check Number:** [Check Number]
- **Date of Check:** [Date]
- **Check Amount:** \$[Amount]
- **Reason for Return:** [e.g., Insufficient Funds / Account Closed]

Your failure to provide sufficient funds to cover this check at the time of issuance or to rectify this matter immediately suggests fraudulent intent. Pursuant to state law, you are hereby given notice to make payment in full to the undersigned.

The total amount now due is as follows:

- Original Check Amount: \$[Amount]
- Service/Returned Check Fee: \$[Fee Amount]
- **TOTAL DUE: \$[Total Amount]**

Full payment must be made in the form of **cash, cashier's check, or money order** within [Number, e.g., 10] days of the date of this notice. Please deliver payment to the address listed below.

Failure to remit payment within this time frame will result in further legal action, which may include filing a civil lawsuit for the amount of the check plus statutory damages, court costs, and attorney fees. Furthermore, we reserve the right to report this matter to the local District Attorney or law enforcement for criminal prosecution regarding the issuance of a fraudulent check.

Govern yourself accordingly.

Sincerely,

[Your Signature]

[Your Printed Name]

[Your Business Name, if applicable]

[Your Address]

[Your Phone Number]