

DATE: [Insert Date]

TO:

[Debtor Name]

[Debtor Address]

[City, State, Zip Code]

FROM:

[Your Name/Company Name]

[Your Address]

[Phone Number]

RE: NOTICE OF DISHONORED CHECK AND DEMAND FOR PAYMENT

Dear [Debtor Name],

This letter serves as formal notice that check number **[Check Number]**, dated **[Check Date]**, in the amount of **[\$Amount]**, made payable to **[Payee Name]**, was returned by your financial institution marked "Insufficient Funds" or "Account Closed."

Pursuant to state law, you are hereby notified that you are liable for the face amount of the check, plus a service charge of **[\$Fee Amount]**, for a total balance due of **[\$Total Amount]**.

Please remit the total amount in the form of a cashier's check or money order within **[Number of Days, e.g., 10]** days of the date of this letter to the address listed above.

Failure to settle this debt within the specified timeframe may result in further legal action. Under applicable statutes, you may be held liable for additional legal penalties, including but not limited to, court costs, attorney fees, and treble damages (three times the amount of the check).

Please govern yourself accordingly.

Sincerely,

[Your Signature]

[Your Printed Name]