

[Company Letterhead/Logo]

[Date]

[Customer Name]

[Customer Address]

[City, State, Zip Code]

Subject: Notice of Insufficient Funds - [Check Number/Transaction ID]

Dear [Customer Name],

This letter is to inform you that the payment submitted to [Your Business Name] on [Date] in the amount of \$[Amount] was returned by your financial institution due to non-sufficient funds (NSF).

The details of the returned transaction are as follows:

- **Check/Transaction Number:** [Number]
- **Transaction Date:** [Date]
- **Amount:** \$[Amount]
- **Returned Item Fee:** \$[Fee Amount]
- **Total Amount Due:** \$[Total Amount]

Please provide a replacement payment for the total amount due, including the returned item fee, within [Number] business days. We accept payment via [Credit Card, Cashier's Check, or Wire Transfer].

If you believe this is an error or if the payment has already been sent, please contact our billing department immediately at [Phone Number] or [Email Address].

Thank you for your prompt attention to this matter.

Sincerely,

[Your Name/Department]

[Your Business Name]