

[Your Company Name]
[Your Address]
[City, State, Zip Code]
[Phone Number]

[Date]

[Customer Name]
[Customer Address]
[City, State, Zip Code]

RE: NOTICE OF DISHONORED CHECK

Dear [Customer Name],

This letter is to inform you that check number #[Check Number], dated [Check Date], in the amount of \$[Amount], has been returned by your financial institution marked "Insufficient Funds" or "Account Closed."

As of this date, your balance of \$[Amount] remains delinquent. Additionally, a returned check fee of \$[Fee Amount] has been applied to your account, bringing your total outstanding balance to \$[Total Amount].

To resolve this matter and avoid further collection action or the suspension of services, please provide payment in full within [Number] days of the date of this letter. We require that this payment be made via certified check, money order, or cash at our office.

If you have already sent a replacement payment, please disregard this notice. If you believe this is an error, please contact our billing department immediately at [Phone Number].

Thank you for your prompt attention to this matter.

Sincerely,

[Your Name/Department]
[Your Title]