

DATE: [Date]

TO:

[Name of Check Writer]

[Address]

[City, State, Zip Code]

RE: FINAL DEMAND FOR PAYMENT - DISHONORED CHECK

Dear [Name of Check Writer],

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/Company Name], was returned by the financial institution marked [Reason: e.g., Insufficient Funds/Account Closed].

As of this date, you have failed to make good on this payment. This is your **FINAL NOTICE**. You are hereby demanded to pay the full face value of the check, plus a service charge of \$[Amount of Fee], for a total of **\$(Total Amount Due)**.

Payment must be made in the form of **cash, cashier's check, or money order** and delivered to the address listed below within [Number, e.g., 10] days of receipt of this letter.

Failure to remit the full amount within the specified timeframe will result in this matter being turned over to the [Name of County] District Attorney's Office for criminal prosecution. Under state law, passing a dishonored check can be a criminal offense punishable by fines and/or imprisonment.

Please govern yourself accordingly.

Sincerely,

[Your Signature]

[Your Printed Name]

[Your Company Name]

[Your Phone Number]

[Address for Payment Delivery]