

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

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

RE: NOTICE OF DISHONORED PAYMENT AND DEMAND FOR RECTIFICATION

Dear [Recipient Name],

This letter serves as formal notice that the payment submitted by you in the amount of \$[Amount] dated [Date of Payment] has been returned by the financial institution marked as "Dishonored" or "Insufficient Funds."

The details of the dishonored instrument are as follows:

Check/Transaction Number: [Number]
Bank Name: [Bank Name]
Reason for Return: [Reason]

Pursuant to state law, you are hereby requested to remit the full amount of the original payment, plus a returned check fee of \$[Fee Amount], for a total balance of \$[Total Amount]. Payment must be made via certified funds (cashier's check or money order) and delivered to our office no later than [Deadline Date/Number of Days].

Failure to settle this debt by the aforementioned date will result in the immediate commencement of legal proceedings against you. This pending litigation may include claims for the original debt, service fees, court costs, and reasonable attorney fees as permitted by law.

Please govern yourself accordingly to avoid further legal action.

Sincerely,

[Your Signature]
[Your Printed Name]