

# Sample Demand Letter

Prior to referring a check to the Program, victims of dishonored checks are required to make at least **one attempt to notify the check writer to demand payment** of the check as well as the posted service fee for handling the returned check, including the bank charges incurred as a result of the bad check. Notice must be transmitted **by regular mail**. The check writer must then be given **ten (10) days** to respond. If, after ten days, the matter has not been satisfied, the check can be referred to the Check Enforcement Program.

The sample demand letter below is suitable to send the check writer. The language of the letter conforms to the requirements of the Washington State Statutes and the Prosecuting Attorney's Office.

**Note:** Victims of dishonored checks must not make any threats of prosecution (written or oral) to enforce or enhance the collection or honoring of the check.

**1** Be sure to date the letter.

**2** You can vary this text, but the text of a demand letter should substantially conform to this wording.

**3** You may require your usual, posted fee amount. When you submit a check to the Check Enforcement Program, we enforce a fee in addition to the full amount of the check.

Keep a copy of the demand letter and enclose a copy of the demand letter and return receipt when you submit the check to the Check Enforcement Program.

If it is returned as undeliverable, you should enclose the undelivered letter when you submit the check to the Check Enforcement Program.

The Check Enforcement Program requires check writers to pay the victim the full amount of the check as well as a fee to help offset the costs that are incurred as a result of the bad check.



In the event you contact the check writer by phone, you should essentially give the same information as shown in this sample letter.

Of course you are free to discuss the matter with the check writer, but remember to avoid threats of prosecution.

(Company Letterhead)

**1** Date

Check writer  
Address  
City, State Zip

Re: **Notice of Dishonored Check**

**2** You are hereby notified that check number       (ck #)      , issued by you on       (date of check)       drawn on       (name of bank)      , and payable to       (name of your business)      , has been dishonored.

You have **ten (10) days** from the date of this notice to tender payment to the full amount of the check plus a fee

**3** of       (\$      )       to the undersigned at       (business mailing address)      .

You are further notified that in the event the above amount is timely paid in full, you will not be subject to legal proceedings, civil or criminal.

Sincerely,

(Signed)  
(Phone number)

## Kittitas County Prosecuting Attorney's Check Enforcement Program

We will do our best to make sure your dishonored check(s) are handled promptly and efficiently. If you have questions about the Program or any of the dishonored checks you have referred, contact us at the phone number or internet address below.

205 W Fifth Avenue, Room 213 | Ellensburg, WA 98926 | toll-free 1-888-779-8329 | [www.hotchecks.net/kittitas](http://www.hotchecks.net/kittitas)