

NOTICE OF DISHONORED CHECK

Date: _____

To:

You are hereby notified that Check No. _____, dated _____ in the amount of _____, drawn upon _____ and payable to _____ has been dishonored for the reason of _____.

Pursuant to the Delaware Code (Title 11, Chapter 5, §900), you have ten (10) days from receipt of this notice to tender payment of the total amount of the check, the total amount due being \$ _____. Unless this amount is paid in full within the time specified above, the dishonored check and all other available information relating to this incident may be turned over to the prosecuting attorney for criminal prosecution.

Mail or deliver the total amount to the following:

Notice Issued by:

Signature: _____

Print Name: _____

Title: _____