NOTICE OF DISHONORED CHECK

Date: _____

To:

This letter is written pursuant to G.S. 6-21.	3 to inform you that	t on			, 20	·,
you apparently made and delivered to [bus	iness/individual]					a
check, number, containing	your name and	address,	and	payable	to	this
business/individual in the sum of \$, drawn upon					
(bank or institution), account #	We have	received	no inf	ormation	that	this
was a stolen check.						

The bank has indicated that the check has been dishonored by the bank for the following reasons:

As acceptor of the check, we give you notice to rectify any bank error or other error in connection with the transaction, and to pay the face value of the check, plus the fees as authorized under G.S. 25-3-506 and G.S. 6-21.3(a) as follows:

Face value of the check #	\$
Processing fee authorized under G.S. 25-3-506	\$
Bank service fees authorized under G.S. 6-21.3	\$
Total amount due:	\$

If the total amount due listed above is not paid within 30 days of the mailing of this letter, thereafter we may file a civil action to seek civil damages of three times the amount of the check (with a minimum damage of one hundred dollars (\$100.00) and a maximum damage of five hundred dollars (\$500.00)) for allegedly giving a worthless check in violation of law (G.S. 6-21.3), in addition to the amount of the check and the fees specified above.

Appropriate relief will then be sought before a court of proper jurisdiction for full payment of the check plus all costs, treble damages, and witness fees.

If you do not believe you are liable for these amounts, you will have a right to present your defense in court. To pay the check or obtain information, contact the undersigned at the above business location. Cash or a bank official check will be the only acceptable means of redeeming the dishonored check.

If you do not believe that you owe the amount claimed in this letter or if you believe you have received this letter in error, please notify the undersigned at the above business location as soon as possible.

Make your payment payable to ______ at the following address:

Mail or deliver the total amount to the following:

Notice Issued by:

Signature:	
Print Name:	
Title:	