

NOTICE OF DISHONORED CHECK

Date: _____

To: [fill in name and address of offender]

1ST NOTICE

2ND AND FINAL NOTICE

WARNING: YOU MAY BE SUED 30 DAYS AFTER THE DATE OF THIS NOTICE IF YOU DO NOT MAKE PAYMENT. IF YOU DISPUTE ANY OF THE FACTS LISTED HEREIN, CONTACT THE PAYEE IMMEDIATELY.

YOUR CHECK IN THE AMOUNT OF \$_____ DATED _____, 20__ PAYABLE TO THE ORDER OF _____ HAS BEEN DISHONORED BY THE BANK UPON WHICH IT WAS DRAWN, BECAUSE:

YOU HAD NO ACCOUNT WITH THAT BANK.

YOU HAD INSUFFICIENT FUNDS ON DEPOSIT WITH THAT BANK.

IF YOU DO NOT MAKE PAYMENT, YOU MAY BE SUED UNDER SECTION 11-104 OF THE GENERAL OBLIGATIONS LAW TO RECOVER PAYMENT. IF A JUDGMENT IS RENDERED AGAINST YOU IN COURT, IT MAY INCLUDE NOT ONLY THE ORIGINAL FACE AMOUNT OF THE CHECK, BUT ALSO ADDITIONAL LIQUIDATED DAMAGES, AS FOLLOWS:

IF YOU HAD NO ACCOUNT WITH THE BANK UPON WHICH THE CHECK WAS DRAWN, AN ADDITIONAL SUM WHICH MAY BE EQUIVALENT TO TWICE THE FACE AMOUNT OF THE CHECK OR SEVEN HUNDRED FIFTY DOLLARS, WHICHEVER IS LESS; OR

IF YOU HAD INSUFFICIENT FUNDS ON DEPOSIT WITH THE BANK UPON WHICH THE CHECK WAS DRAWN, AN ADDITIONAL SUM WHICH MAY BE EQUIVALENT TO TWICE THE FACE AMOUNT OF THE CHECK OR FOUR HUNDRED DOLLARS, WHICHEVER IS LESS.

PLEASE MAKE PAYMENT IN THE AMOUNT OF \$_____ TO _____, AT THE FOLLOWING ADDRESS:

Mail or deliver the total amount to the following:

Notice Issued by:

Signature: _____

Print Name: _____

Title: _____