

NOTICE OF DISHONORED CHECK

Date: _____

To: [fill in name and address of offender]

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 42 Pa.C.S.A. § 8304, you have ten (10) days from receipt of this notice to pay or tender to _____ (holder of check) the full amount of the check, together with interest and service charges* of \$_____, the total amount due being \$_____. Unless this amount is paid in full within the specified time above, you will be liable for statutory damages of \$100.00 or triple the amount of the check, whichever is greater.

*The service charge shall not exceed \$20 unless the holder is charged fees in excess of \$20 by financial institutions as a result of such bad check or similar sight order for the payment of money. If the holder is charged fees in excess of \$20, then the service charge shall not exceed the actual amount of the fees.

Mail or deliver the total amount to the following:

Notice Issued by:

Signature: _____

Print Name: _____

Title: _____