

RETURNED CHECK LETTER

Sender Name: _____
Sender Address: _____
Sender Phone / Email: _____

Recipient Information:

Full Name: _____
Address: _____
Phone / Email: _____

Check Details:

Check Number: _____ Bank Name: _____
Date Issued: _____ Amount: _____ USD

Reason for Return:

The above-referenced check was returned due to insufficient funds, closed account, stop payment, or other reasons as indicated by the bank. This letter serves as formal notice of the returned check and requests prompt payment.

Payment Instructions:

Please remit payment in full by certified check, money order, or electronic transfer within seven (7) calendar days of receipt of this letter. Failure to do so may result in further actions to recover the amount due, including but not limited to collection efforts and legal proceedings as permitted by applicable law.

Additional Terms:

1. This letter and the obligations herein are governed by the laws of the United States of America and applicable state law.
2. Any disputes arising out of this matter shall be resolved in the appropriate court of competent jurisdiction.
3. Payment of the returned check amount does not waive any other rights or remedies available to the sender.
4. All communications regarding this matter should be directed to the sender's contact information provided above.

Sincerely,

Authorized Signatory

SENDER'S SIGNATURE

RECIPIENT'S ACKNOWLEDGEMENT

Signature: _____

Signature: _____

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