SAMPLE: 10 DAY DEMAND LETTER

Date:			
Name:			
Address:			
City:	State:	Zip:	
Dear	,		
Your check number	dated	made pay	able to
on the Bank in t	in the amou	ant of <u>\$</u>	drawn
State of, i			
Insufficient Funds Account Closed No Account Unable to locate Other			
If the above described check POSTMARK of this letter, it will be Office for Prosecution.	is not redeemed in referred to the Fourt	full within ten (10) h Judicial District, Di	days from the strict Attorney's
The law also provides that a \$2 cost and inconvenience.	25.00 fee be paid to us	for each worthless che	ck, to cover our
Yours truly,			
			•
Merchant/Holder)			