

NOTICE OF DISHONORED CHECK

Date:

To:

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 Wisconsin Statutes, (Chapter 943-245), you have twenty (20) days from receipt of this notice to tender payment of the total amount of the check plus costs of \$ _____, the total amount due being \$ _____. Twenty (20) days from the date of this notice, a civil action may be commenced against you to recover damages. Unless the check amount is paid in full prior to the commencement of this action, you will be liable for damages not to exceed five times the face value of the check, plus actual damages, attorney fees and costs, such damages not to exceed \$500.00. You may also be exposed to criminal liability.

Mail or deliver the total amount to the following:

Notice Issued by:

Signature: _____

Print Name: _____

Title: _____