Date				
Name of Check Writ	ter			
Check Writers Addre	ess			
Dear Sir/Madam:				
This is a der funds or insufficient	funds. If you fail to make to pay creates a	ent in full for check(s nake payment in full v presumption for con	within 10 days after o	date of receipt of this
Restitution	can be made in th	ne form of a cashid	ers check or mone	y order payable to
full restitution is not the Leon County Att	•	•	er, then this matter v	will be turned over to
Sincerely,				
Chapter 4	Charle Data	Original Assessment	D-turned Observe	Takal Assassa
Check(s) #	Check Date	Original Amount	Returned Check Fee	Total Amount Due