## NOTICE OF REFUSAL OF PAYMENT OF CHECK BY DRAWEE AND DEMAND FOR PAYMENT To: Date You are hereby notified that a check dated 20 in the amount of \$ Drawn by you on \_\_\_\_\_ Bank has been refused payment by the bank because of \_\_\_\_\_ Demand is hereby made upon you for the immediate payment of the above identified check. Your attention is directed to a portion of the Iowa Law concerning checks. See below. **HOLDER** Check \$\_\_\_\_ Name of Address CRIMINAL CODE OF IOWA, CHAPTER 714 – THEFT Section 714.1, Theft Defined: A person commits theft when the person does any of the following: Makes, utters, draws, delivers, or gives any check, share draft, draft, or written order on any (6) bank, credit union, person, or corporation, and obtains property, the use of property, including rental property. or service in exchange for such instrument, if the person knows that such check, share draft, draft, or written order will not be paid when presented. Whenever the drawee of such instrument has refused payment because of insufficient funds, and the maker has not paid the holder of the instrument the amount due thereon within 10 days of the maker's receipt of notice from the holder that payment has been refused by the drawee, the court or jury may infer from such facts that the maker knew that the instrument would not be paid on presentation. Notice of refusal of payment shall be by certified mail, or by personal service in the manner prescribed for serving original notices. Whenever the drawee of such instrument has refused payment because the maker has no account with

the drawee, the court or jury may infer from such fact that the maker knew that the instrument would not be paid on presentation.

CERTIFICATE OF MAILING NOTICE			
The undersigned, states that on the	day of	, 20	_he/she personally
mailed to the above named person the above notice envelope with proper postage thereon, addressed by depositing the same on said date in a United Stowa. I certify under penalty of perjury and pursuand correct.	to said person at said person at said person tates Post Office mail rece	on's last known F ptacle in	Post Office address,  County,
Retain copy showing certification of mailing or return of service by endors	sementSigna	ture	