

Parent Teacher Organization

Mailing Address: P.O. Box [REDACTED]
Canutillo, TX 79835
(915) Contact Number

Name and Address
Of Check Writer

Dear Check Writer,

You are hereby given notice of dishonor and demand is made for payment of the full amount of the check, copy attached, and a merchant fee of \$30.00 per check, as authorized by Texas Business & Commerce Code Section 3.506, within ten (10) days of your receipt of this letter. Payment must be made in cash, money order or a certified check to **(Campus Name) PTO**. Do not send cash through the mail. The total amount owed is \$ [REDACTED] (including the \$30.00 fee). Please make payment at:

Provide an Address to Mail Payment of Returned Check

If you fail to pay the total amount within ten (10) days, this check will be forwarded to the County Attorney's Office for collection. Once that occurs, the (Canutillo Name) PTO can no longer accept any payment from you. The County Attorney's Office will collect the full amount of the check, the District's \$30.00 fee and a County Attorney fee. If you fail to pay the full amount owed within the stated time period, you are subject to arrest and detainment in the County Jail.

Sincerely,

(Signature of PTO President or Treasurer)