NSF Worksheet

Bank Contact Date _____

Company Name (MAKER) _____

Address_____

Phone# _____

Date of Check _____ Chk #_____ $_____

Invoice#_____

_____ **NSF 1st Time**   _____**NSF 2nd Time**

Customer Contact:

Date	Time	Comments
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

NSF fee #1 Inv #_____   NSF fee #2 Inv #_____   *(RTND CHECK)*

NSF letter #1_____   NSF letter #2 _____   NSF letter #3_____   DA_____

4.1.1 R/C

Computer Update (menu 12.2.15) ON _____   OFF *(#13/#15)* _____

Date Paid_____