

BAD CHECK INFORMATION SHEET / REFERRAL FORM

Clinton County Prosecutor's Office~P.O.Box 285, Plattsburg MO 64477~~816-539-3711

When a bad check complaint is received, my office determines whether a criminal charge can be filed. If charges are filed, the defendant may request a trial. If a trial is requested, the person who took the check will be required to testify truthfully and identify the person who passed the check. The information requested in this form is required to file a criminal complaint. Please fill in all areas of this form and sign the area on the back. The person who took the check must be identified in Sec 3 below. Please return original check with this form to our office.

1. Check writer's name: \_\_\_\_\_

Complete Full Address: \_\_\_\_\_

Sex \_\_\_\_\_ Approx Height \_\_\_\_\_ Approx Weight \_\_\_\_\_ Approx Age \_\_\_\_\_ Race \_\_\_\_\_

Any Identifying features: (scars, marks, tattoo, glasses, eye color, etc.) \_\_\_\_\_

Driver's License No.: \_\_\_\_\_ State \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Social Security No.: \_\_\_\_\_ Did you check photo ID ? \_\_\_\_\_

2. Name of your business: \_\_\_\_\_

Address: \_\_\_\_\_

Phone Number: \_\_\_\_\_ Fax Number: \_\_\_\_\_

Was this check passed to you in CLINTON COUNTY, Missouri ? \_\_\_\_\_

3. Who actually accepted this check from the check writer ? \_\_\_\_\_

Is this person available to testify ? \_\_\_\_\_ Can they identify the check writer ? \_\_\_\_\_

4. Check# \_\_\_\_\_ Date the check was passed ? \_\_\_\_\_ Amount of the check ? \$ \_\_\_\_\_

Name of Bank check was drawn on: \_\_\_\_\_

Why did bank return the check: Insufficient Funds \_\_\_ Acct Closed \_\_\_ Payment Stopped \_\_\_\_\_

Was there a request that the check be held? \_\_\_\_\_ Was the check postdated? \_\_\_\_\_

Was there any statement made about the check not clearing the bank? \_\_\_\_\_

5. What was the check issued for: To purchase goods on date check was issued? \_\_\_\_\_

Payment for services? \_\_\_ Payment on Acct? \_\_\_ Payment for Rent? \_\_\_ Payment for Wages? \_\_\_\_\_

Other payment? (Please specify) \_\_\_\_\_ What was given in exchange for the

check? \_\_\_\_\_ Do you have any receipts that correspond with the check? \_\_\_\_\_

6. A 10 day letter sent by you is only required in the event of a Stopped Payment check. If this check has had a Stop Payment placed on it, you will need to send the check writer a 10-day certified letter, with return receipt requested. We require that you attach a copy of the 10-day letter you sent them, along with a copy of the green postcard showing the signature of the person who received the letter.

Even if the letter was refused or returned, we still need a copy.

7. Have you accepted any partial payments on this check? \_\_\_\_\_

8. Since the check was returned to you, has the suspect made any statement to you about the check? \_\_\_\_\_  
If yes, What statement was made? \_\_\_\_\_

**Over, Back of this form must be signed before charges are filed.**

**I HAVE READ AND UNDERSTAND THE FOLLOWING:**

1. The purpose of filing a complaint with the prosecutor's office is to begin criminal prosecution. Our sole purpose once the complaint is filed is to prosecute the defendant and to see that the person is punished.
2. If it is your desire to collect the money owed you, but not to prosecute the person, it is suggested that you contact a private collection agency.
3. It is the policy of this office to correspond with the suspect using the address on the check, or the last known address.
4. This office will review each complaint to determine if a criminal charge can be successfully prosecuted. If a charge is filed specific information is required for the Sheriff's Department to enter the warrant into the computer.
5. If the suspect contacts you after the check is sent to our office, ***DO NOT*** accept payment. Refer the person to my office. This will allow accurate restitution to be made, and avoid a claim that a portion of the check is paid.
6. Restitution by a defendant is not a defense to a criminal prosecution. You may be required to testify even if restitution is made. Once a complaint is filed with the court it will not be dismissed without good cause.
7. While every effort will be made by my office to see that restitution is made by the defendant, in some cases, sending the defendant to jail or prison is the only disposition. If the defendant has a bad record or fails to honor probation requirements, he may be sent to prison to serve a sentence and then no restitution will be made.
8. If you refuse to testify or provide the necessary witnesses to prosecute the case this will result in the case being dismissed. In addition to the possible civil ramifications, you may be ordered to pay the court costs of the case.
9. Please note that we recommend that you refer bad checks to our office just as soon as they are returned by the bank to you. Please mail or bring the original check to our office together with this completed form. Please also note that the Clinton Co. Sheriff's Office requires us to have a proper date of birth OR social security # OR driver's license # in order to process a warrant; so please obtain this information before referring checks to this office.
10. By signing this complaint you are indicating that the facts contained on this document are true to your best knowledge, information and belief. Further, you understand that if payment is not received after a notice letter is sent, a request will be made that criminal charges be filed against the person identified on the reverse side of this page.

**Signature of Complainant:** \_\_\_\_\_

**Print the name signed above:** \_\_\_\_\_ **Date of Signature:** \_\_\_\_\_