03/16/2011

BAD CHECK CRIME REPORT

MERCED COUNTY DISTRICT ATTORNEY

LARRY D. MORSE, II

Bad Check Program Address:
P.O. Box 3498
Merced, CA 95344-1498

Bad Check Program Contact:
(877) 607-2861 - Merchant Hotline
(800) 931-8144 - Check Writer Hotline
(Please refer check writer to the "check writer" hotline)

For more information: checkprogram.com/mercedcountyca

Step 1
Confirm Eligibility

The following types of checks are ineligible for the program:

*Two-party checks
*Payroll, credit card or rent checks
*Checks passed outside of your county
*Partially re-paid checks
*Post/pre dated or altered checks
*Checks which are repayment of loan or civil contract agreement
*Fraudulent or stamped lost/stolen/forged
*Checks you agreed to hold before depositing

Step 2
Victim Information

Victim/Business Name:_____

Contact Name: _____ **Title:** _____

Victim Contact Information: **Email:** _____
(Required)

Phone:(_____)_____Fax:(_____)_____

- ***Email and/or fax are required for acknowledgement receipt of check and/or Program communication***

Address:_____**City:**_____**State:**_____**Zip Code:**_____

If assessed a bank charge(s) for the attached bad check(s) please state the amount of the bank charge per check

$_____ ***(Per California Penal Code 1001.65 (c) you are eligible to be reimbursed up to $15 per check for assessed bank charges.)***

Step 3
Check Writer Information

Check Writer's Name:_____

Address:_____**Apt:**_____

City:_____ **State:**_____ **Zip Code:**_____

Home Phone:(_____)_____Other Phone:(_____)_____

Driver's License # / Other ID #:
_____

State: _____ **Date of Birth:** ____/_____/_____

Other ID: (if applicable)
_____

Oral or Written notice has been sent to recover the bad check(s) in question. If no attempt has been made, the check is not eligible for prosecution. (See courtesy notice on back as example.) Required

Step 4
Check Information

Ck. No.	Date Passed	$ Amount	Name of person accepting check *(if no longer employed please list manager)*	Can person ID check writer?
_____	_____	_____	_____	☐ Yes ☐ No
_____	_____	_____	_____	☐ Yes ☐ No
_____	_____	_____	_____	☐ Yes ☐ No

Address where check was accepted (if different than Step 2):_____ **(Required)**

City:_____ **State:**_____ **Zip Code:**_____

Step 5
Victim Verification
Sign & date

- I will not accept direct payment from the check writer after filing this report with the Program. Please refer check writer to (800) 931-8144.
- I understand that the check writer has the option to dispute this claim in writing with the Bad Check Program.
- If this crime report is not completely filled out it may prevent or delay this case from moving forward for prosecution review.
- I attest that I have sent notice to the check writer and after 10 days it remains unpaid.
- I have reviewed the filing instructions, I hereby affirm and attest under penalty of perjury, that all information provided on this crime report is true to the best of my knowledge.

X_____ _____ _____
Signature of Person Filing (Required) **Print Name of Person Filing** **Date Filed**

Staple **original** or **bank-generated substitute** check here

Additional crime reports are available at: checkprogram.com/mercedcountyca

For additional information and crime reports: checkprogram.com/mercedcountyca

Sample "Courtesy Notice"

Date

Dear Check Writer:

You are hereby notified that a check numbered_____ in the face amount of $_____, issued by you on _____drawn upon _____ bank, and payable to _____, has been dishonored. You have 10 days from receipt of this notice to tender payment of the full amount of such check plus a service charge of $_____, the total amount due being $_____.

Unless this amount is paid in full within the time specified above, we may turn over the dishonored check and all other available information relative to this incident to the District Attorney's Office for potential criminal prosecution.

Closing,

Your name/address

Bad Check Program Information

As a victim of a bad check you may file this report with the Merced County District Attorney, provided there is sufficient information, and that the check meets all eligibility guidelines. The Merced County District Attorney's Office will seek full restitution for victims whenever possible; however, please keep in mind that the Bad Check Restitution Program can make no recovery guarantees. By submitting the check to the program you surrender control of the check to criminal process and forego the opportunity to pursue civil debt collections.

Check writers are encouraged to make payments in full. Should a partial payment be received, the payment will be allocated between the victim and the Bad Check Program. "Restitution" refers to the face value of all checks listed on this report along with all "stated" bank charges assessed by your bank.

A check will be deemed ineligible and returned to you to pursue a civil remedy, if a filed check is later determined to be:

- A stop payment check where the issuer acted in good faith and with reasonable cause in stopping payment,
- A check issued by someone not competent or of legal age,
- A check dishonored due to bank error or failure to notify the check writer of bank adjustment of a check,
- A check issued to pay an obligation arising from an illegal transaction.

What to do after my crime report is filed with the Program

- Please **do not** accept direct payments from check writers. Should the check writer contact you to make payment, refer them to the Check Writer Hotline at (800) 931-8144.
- You may contact Merchant Care for case updates at (877) 607-2861 at anytime.
- Please allow a minimum of 90 days to pursue restitution.
- If the check writer does not comply with the Program, the case may be reviewed for possible criminal prosecution.
- If we are unable to recover restitution and/or the check is not "eligible" for prosecution, you may request the check(s) be returned to pursue a civil remedy.

Filing Instructions

1. Fill out Report Completely.
2. Attach checks and all supporting documents such as CERTIFIED MAIL RETURN RECEIPT OR UNDELIVERED LETTER, COPY OF "COURTESY NOTICE," "RETURN ITEM" NOTICE FROM THE BANK (WITH FEES).
3. Mail Bad Check Crime Report and all other correspondence to:
   Merced County Bad Check Restitution Program
   P.O. Box 3498, Merced, CA 95344-1498
4. Once a report has been filed: ALL restitution payments must be coordinated by the District Attorney's Office. Should the check writer contact you to make payment, direct them to the Bad Check Restitution Program at (800) 931-8144.
   DO NOT ACCEPT PAYMENT DIRECTLY FROM CHECKWRITER.