

MARK A. MCCANN
HOWARD COUNTY PROSECUTOR
HOWARD COUNTY, INDIANA
62ND JUDICIAL CIRCUIT

765-456-2230
765-456-2505 FAX

104 N. BUCKEYE STREET
COURTHOUSE, ROOM 208
KOKOMO, INDIANA 46901

BAD CHECKS

The Prosecutor's Office will help you in the collection and prosecution of a bad check. The person in charge of bad checks is Paige, and she can be reached during the hours of 8:00 A.M. to 4:00 P.M., at (765) 456-2230. At other times, or at times when she is not in, a message can be left on her voice mail.

In order for us to help you with a bad check, you must first write a ten (10) day demand letter to the person who issued the check. This letter must be sent by certified mail, with a return receipt requested. The letter should be sent to the current address of the person who wrote the check, and if that is not known, it should be sent to the address which is printed on the check. If you have not received payment after the ten (10) days, then you may bring this check to the Prosecutor's Office between the hours of 8:00 A.M. and 4:00 P.M., Monday through Friday. When bringing the check to our office, you will be required to fill out certain forms and agreements regarding the collection and prosecution of this check. It will first be our effort to collect the money for the check, but in the event that this is not possible, or in the event of a repeat offender, the prosecution of the individual will be most important to us.

The Prosecutor's Office will have the following rules for the bad check program.

1. We will not prosecute a check that was returned from the bank for insufficient funds, closed account, etc. more than ninety (90) days from the date it was written.
2. We will be unable to file a Check Deception charge without a social security number and date of birth or a drivers license number for the drawer of the bad check.
3. It will not be our practice to prosecute any bad check that involves a civil matter including but not limited to loans, contracts, promissory notes or verbal agreements.
4. We will not prosecute second-party or third-party checks.
5. We will not prosecute payroll checks.
6. We will not prosecute stop-payment checks.
7. In order to help you with the check, we will need the original check and we will need to keep it at this office until we are finished with the case.

BAD CHECK AGREEMENT

The undersigned agrees to the following:

- a.) The Howard County Prosecutor may collect and hold for my benefit money in payment of the bad check.
- b.) The Howard County Prosecutor will collect and retain fees from the issuer of the bad check in consideration of the services provided.
- c.) Only the face amount of my bad check, if collected, will be returned to me. All protest fees and collections fees will be kept by the Howard County Prosecutor.
- d.) Dispersments on money collected on your behalf will be dispersed to you at the discretion of the Howard County Prosecutor.
- e.) Appear in court to testify if necessary and direct any employee involved to appear in court in response to a subpoena.
- f.) Not to collect on a bad check after it has been turned over to the prosecutor's office.
- g.) The Prosecutor will be the one to determine if and when the charges should be filed or dropped.

Dated: _____

Merchant

Authorized agent

Telephone

Subscribed and sworn to before me this _____ day of _____, 20_____.

My commission expires:

NOTARY PUBLIC
A resident of _____ County, Indiana

CHECK DECEPTION PROBABLE CAUSE AFFIDAVIT

_____, being first duly sworn upon his oath says that on the
(Complainant)

_____ day of _____, 20____, in the county of Howard and State of

Indiana, _____, issued check number _____
(Check maker)

drawn upon the _____ to _____
(Bank) (Merchant/Individual)

for payment of money in the amount of \$_____. That subsequently the check was
presented to the bank for collection and was returned marked _____.
(NSF, Account closed, etc.)

That complainant sent a certified letter, _____, to
(Article number)

_____ on _____ and said letter
(Check maker) (Date)

was certified, a copy of which is attached hereto as exhibit _____. Said check was not paid
within ten (10) days of posting of the notice.

The complainant is an employee of: _____

Address: _____

Phone No.: _____

Complainant signature/Authorized agent: _____

Subscribed and sworn to before me this _____ day of _____, 20_____.

My commission expires: _____

A resident of

NOTARY PUBLIC
County, Indiana

BAD CHECK COMPLAINT FORM

THE FOLLOWING FORM MUST BE COMPLETELY FILLED OUT FOR EACH CHECK SUBMITTED TO THE PROSECUTING ATTORNEY'S OFFICE. EACH BLANK MUST BE ANSWERED. IF THE ANSWER IS NOT KNOWN WRITE "UNKNOWN" OR "NONE", ETC. THE PERSON (WHETHER INDIVIDUAL, PARTNERSHIP, COMPANY, CORPORATION, ETC.) RECEIVING THE CHECK IS KNOWN AS THE COMPLAINANT. THIS FORM MUST BE SIGNED BY COMPLAINANT RECEIVING THE CHECK OR HIS AUTHORIZED AGENT.

1. NAME OF COMPLAINANT: _____
COMPLETE ADDRESS: _____
PHONE NUMBER: _____

2. NAME OF PERSON ACCEPTING CHECK: _____
COMPLETE ADDRESS: _____
PHONE NUMBER: _____
POSITION: _____

3. CHECK NUMBER: _____
DATE WRITTEN: _____
AMOUNT OF CHECK: _____

4. CHECK MADE PAYABLE TO: _____
REASON CHECK WAS REFUSED BY BANK: _____
DRAWN ON _____ BANK.
ADDRESS: _____

5. DATE FIRST PRESENTED TO BANK FOR PAYMENT: _____

HOW OFTEN WAS CHECK PRESENTED FOR PAYMENT: _____

6. NAME OF PERSON WHO IS DRAWER ON CHECK: _____

ADDRESS: _____

PHONE NUMBER: _____

SOCIAL SECURITY NUMBER: _____

DATE OF BIRTH: _____

DRIVERS LICENSE NUMBER: _____

DID THE DRAWER CASH THE CHECK? _____

HOW WAS HE IDENTIFIED? _____

IS THE PERSON WHO CASHED THE CHECK PERSONALLY KNOWN BY
COMPLAINANT OR EMPLOYEE? _____

WAS THE CHECK POST-DATED? _____

WAS THERE ANY AGREEMENT OR UNDERSTANDING WITH THE CHECK
MAKER TO HOLD THE CHECK FOR TENDERING TO BANK LATER? _____

WAS CHECK TAKEN TO SECURE LOAN OR DEBT? _____

WAS THE CHECK GIVEN IN PAYMENT OF PAST DUE OR CURRENT
ACCOUNT? _____

WHAT WAS OBTAINED BY CHECK? CASH: _____
OTHER: _____

ANY PAYMENT RECEIVED ON THE CHECK? _____

IF YES, GIVE AMOUNT AND DATE: _____

7. HAS THE PERSON CASHING THE CHECK EVER GIVEN ANY CHECK(S) TO THE COMPLAINANT BEFORE? _____

IF SO, HAS ANY CHECK NOT BEEN HONORED BY THE BANK WHEN FIRST PRESENTED? _____

GIVE DETAILS: _____

8. WHICH IS MOST IMPORTANT TO YOU? (CHECK ONE ONLY) COLLECTION OF CHECK _____ OR PUNISHMENT OF DRAWER _____

THE ABOVE INFORMATION IS TRUE AS BEST I RECALL OR AM RELIABLY INFORMED. I WILL SIGN CRIMINAL CHARGES AGAINST CHECK MAKER, AND TESTIFY IN COURT, WHETHER THE CHECK IS ULTIMATELY MADE GOOD (BY PAYMENT) OR NOT --- AND WILL REPORT ALL INFORMATION I RECEIVE TO ASSIST PROSECUTION.

COMPLAINANT

PRINTED

CHECK LIST:

- ORIGINAL CHECK
- BAD CHECK COMPLAINT FORM
- 10-DAY LETTER WITH PROOF OF CERTIFIED MAILING
- PROBABLE CAUSE AFFIDAVIT