

BAD CHECK PROSECUTION REQUEST AND QUESTIONNAIRE
 (A separate form must be prepared for each check submitted) **REVISED 1-11-2011**

1. Name: _____ Phone No. (____) _____
2. Address: _____
3. Business Name: _____
4. Business Address: _____
5. Business Phone No: (____) _____
6. Name of the person who issued the check (**Defendant**) _____
 If the check was drawn upon a business account, describe the relationship of the Defendant to the business: _____
7. Defendant's Address: _____
8. Was the address of the Defendant confirmed as being current [] yes [] no
9. Defendant's date of birth: _____
10. Defendant's driver's license No: _____
11. Defendant's social security No: _____
12. Description of goods or services received by the defendant: _____
13. Were the goods or services received by the defendant delivered **contemporaneously** with receipt of the check? [] yes [] no
14. How was the check delivered [] personally [] by mail [] other _____
15. Person who saw Defendant **issue and sign** the check: _____
16. Can he/she identify the person who issued the check? [] yes [] no
17. Was the defendant's identification confirmed by a photo ID? [] yes [] no
18. Did the defendant ask that you hold the check? [] yes [] no
19. Did you agree to hold the check? [] yes [] no
20. Was the check post dated? [] yes [] no
21. Was the check given for payment on account? [] yes [] no
22. Was a stop payment order issued for the check? [] yes [] no
23. Have you been informed that the defendant has filed bankruptcy? [] yes [] no
24. Did the defendant indicate in any way that at the time the check was issued that there were insufficient funds in his/her account? [] yes [] no
 If yes, describe: _____
25. Did you demand payment of the check from the defendant? [] yes [] no
26. If yes, was the demand made in person to the defendant? [] yes [] no
27. If yes, was the demand made by letter to the defendant? [] yes [] no
28. Has any payment been received on said check? [] yes [] no
29. If yes, describe in detail: _____
30. Describe all bank charges and handling fees **actually** imposed on you by any financial institution as a result of the check being returned: _____

The undersigned acknowledges and agrees that the check described in this questionnaire is being presented to the County Attorney's office for **criminal prosecution**; that after submission of this prosecution request to the County Attorney's office, the undersigned will **immediately** notify the County Attorney's office in the event said check is paid; and that the undersigned and his or her employees and representatives will cooperate in the prosecution of the criminal offense, including testifying in court, if necessary. The undersigned hereby certifies that he or she has read this entire document as fully completed and that the facts stated herein are true and correct.

DATE: _____ Name _____ Title _____

Return this form to Daniel P. Bracht, Cuming County Attorney, 127 East Walnut Street, P.O. Box 252, West Point, NE 68788, with the following:

1. The original check from the defendant.
2. All documents returned with the check from the bank, if any.
3. A check made payable to the Cuming County Treasurer in the amount of \$10.00 for each check.

FOR OFFICE USE ONLY
Date received: _____
Bad check No: _____