



**BAD CHECK CRIME REPORT**  
**J.E. CHOSTNER, DISTRICT ATTORNEY**  
**TENTH JUDICIAL DISTRICT ATTORNEY**  
**701 COURT STREET, PUEBLO, CO 81003**  
**(719)583-6030**

DATE RECEIVED <i>(office use only)</i> : _____	REPORT #: _____
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**PLEASE ANSWER THE FOLLOWING QUESTIONS, PRINT ALL INFORMATION IN INK & SIGN BELOW**

1. Was check post-dated at time of acceptance?  Yes  No    4. Were you asked to hold/delay depositing check(s)?  Yes  No  
 2. Does this matter involve a two-party check?  Yes  No    5. Does the check involve an extension of credit?  Yes  No  
 3. Was check received as payment on account?  Yes  No

A "YES" answer to any of the above questions indicates this is a CIVIL matter and is therefore ineligible for filing with the District Attorney. Please contact the nearest small claims court for instructions on how to proceed with a civil case. If all boxes were checked "NO", please complete this report, date and sign it and forward to the above mailing address. **IF NO PHOTO I.D. WAS REQUESTED FROM THE CHECK WRITER AND WRITTEN ON THE CHECK, THE CHECK IS INELIGIBLE FOR FILING WITH THE DISTRICT ATTORNEY'S OFFICE. YOU WILL NEED TO FILE AS A CIVIL MATTER.**

A "Courtesy Notice" *(see sample notice on reverse side)* **MUST** be sent to the check writer prior to submitting this complaint. On what date did you send notice? \_\_\_\_\_ *(Please attach documentation.)* **CHECK MUST BE SUBMITTED NO EARLIER THAN 31 DAYS BUT WITHIN 90 DAYS OF ACCEPTANCE.**

Victim/Merchant Name: \_\_\_\_\_  
 Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_  
 Contact Name: \_\_\_\_\_ Title: \_\_\_\_\_  
 Email: \_\_\_\_\_  
 Phone: (\_\_\_\_) \_\_\_\_\_ Fax: (\_\_\_\_) \_\_\_\_\_  
*Email and/or fax are required for acknowledgment receipt of check and/or Program communication*

Check Writer's Name: \_\_\_\_\_  
 Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_  
 Home Phone: (\_\_\_\_) \_\_\_\_\_ Other Phone: (\_\_\_\_) \_\_\_\_\_  
 Drivers License #/Other ID #: \_\_\_\_\_ State: \_\_\_\_\_ Expiration Date: \_\_\_/\_\_\_/\_\_\_  
 Date of Birth: \_\_\_/\_\_\_/\_\_\_ Other ID (if applicable): \_\_\_\_\_  
*A "Courtesy Notice" must be sent to recover the bad check(s) in question. If no attempt has been made, the check is not eligible for prosecution. (See sample notice on back.)*

Check #	Date Received	Amount	What was check for?	Name and Date of Birth of Person Accepting Check	Can Person ID Check writer?
					<input type="checkbox"/> Yes <input type="checkbox"/> No
					<input type="checkbox"/> Yes <input type="checkbox"/> No
					<input type="checkbox"/> Yes <input type="checkbox"/> No
					<input type="checkbox"/> Yes <input type="checkbox"/> No

Address where check was accepted: \_\_\_\_\_ *(Required)*  
 City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

- I understand that I must **NOT** accept restitution from check writer after filing report with the District Attorney's Office.
- I understand that the check writer has the option to dispute this claim in writing.
- 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 sent courtesy notice to the check writer, who did not respond after 15 days and 30 days have elapsed since the check was written.
- I have reviewed the filing instructions and 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

## FILING THE BAD CHECK CRIME REPORT:

**Victims of bad checks may file a report with the Tenth Judicial District Attorney, provided there is sufficient information, and that the case meets all eligibility guidelines.** The District Attorney's office will seek full restitution for victims whenever possible; however, please keep in mind that this office is a prosecuting agency and therefore can make no recovery guarantees. "Restitution" refers to the face value of all checks listed in the report, along with all reasonable "returned item" charges assessed by the bank (a copy of the bank NSF charge must be included).

- A. **FILL OUT REPORT COMPLETELY. Attach checks and all supporting documents such as CERTIFIED MAIL RETURN RECEIPT OR UNDELIVERED LETTER, COPY OF "CERTIFIED NOTICE", "RETURNED ITEM" NOTICES FROM THE BANK (WITH FEES). COPY ALL INFORMATION FOR YOUR RECORDS.**
- B. Mail this report directly to the Tenth Judicial District Attorney Bad Check Program (address listed below).
- C. 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 Program at (719)583-6030.

## AFTER FILING:

- A. If you do not receive restitution within 60 days, contact the District Attorney Bad Check Program.
- B. If restitution is not received from the check writer, your report will be evaluated for criminal prosecution.
- C. **IF PROSECUTABLE, YOU WILL NOT RECEIVE FURTHER NOTICE UNTIL THE SUSPECT HAS BEEN ARRAIGNED IN COURT.** This office will retain all checks as a matter of official record. If for some reason the report is not prosecutable, the check(s) will be returned at your request.

### 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 \_\_\_\_\_ 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, the holder of such check may turn over the dishonored check and all other available information relating to this incident to the District Attorney for criminal prosecution

Closing

Your name/address

### MAIL BAD CHECK CRIME REPORT AND ALL OTHER CORRESPONDENCE TO:

TENTH JUDICIAL DISTRICT ATTORNEY BAD CHECK RESTITUTION PROGRAM

701 COURT STREET, PUEBLO, CO 81003

<http://county.pueblo.org/checkfraud>