

Investigation Kit for Insufficient Funds and Account Closed Checks

1. If criminal prosecution is instituted, it might be necessary for those people having knowledge of the facts to appear and testify in court.
2. To successfully prosecute a bad check case, the person accepting the check must be able to identify the issuer.
3. Checks issued under the following circumstances cannot be accepted by the police department for investigation, nor can they be prosecuted under State's Attorney's guidelines or 13 VSA 2022:
 - a. Post dated checks or checks that you agreed to hold before depositing.
 - b. Checks received by mail or courier.
 - c. Checks issued as payment, either in full or in part, on an account.
 - d. Third party checks will not be accepted for prosecution unless the complainant can prove that the issuer or payer, as listed on the check, is the person who actually issued the check.
 - e. Bad checks on which partial payment has been made.
 - f. Checks on which payment has been stopped.
 - g. Checks in an amount under twenty dollars, unless the issuer has established a pattern by writing several checks.
 - h. Checks on which the identity of the issuer has not been verified by supporting identification documents or personal knowledge.
 - i. Checks more than one year old.
4. A bad check must be presented and refused by the drawee within thirty days of the day it was issued. A ten day statutory demand notice must be mailed to issuer by certified mail, return receipt requested, at the issuer's last known address.
5. Part 1 of the information report must be signed by the complainant having knowledge of the transaction, e.g. – manager, cashier, owner, etc. Part 2 must be completed and signed by the person who actually took the check.
6. Please return the completed information report, the original check, a copy of the demand letter, and certified mail receipt to the Middlebury Police Department at 94 Main Street, Middlebury, VT 05753.
7. If payment is received within the ten (10) day period, notification must be made to the Middlebury Police Department.

The information report contains all information required to initiate prosecution for passing a bad check. The report will be assigned to an officer, who will review and act on it. Insufficient or incomplete information reports will result in the inability of the department to further pursue the complaint and the check will be returned.

Part 1

Information Report

To be completed by person making complaint.

1. Your business name _____
2. Business address _____
3. Person making report _____ Job Title _____
4. Full address of business, branch, place where check was accepted:

Telephone Number _____
5. Check Number _____ Date check accepted _____ Amount _____
6. Name of person who presented check _____
7. Was check presented for payment or deposited more than once?
Yes [] No [] When _____
8. On what date was issuer's account closed? _____
9. What steps you or your employees have taken to contact the suspect and/or recover your loss?
Was the issuer contacted? _____ By whom? _____
When _____
Where _____
Result _____
10. Has the issuer attempted to make restitution? _____ If so, please detail.

11. Have you instituted civil proceedings against the issuer? Yes [] No []
What Court? _____ Docket # _____
Case Status _____
12. Have you retained an attorney, or turned this matter over to a collection agency, in an attempt to collect the check? Yes [] No []
If so, whom: _____

13. Please indicate below anything you feel would help in locating and prosecuting this person.

Part 2

Must be completed by the person who actually took the check.

1. Your name _____
Home address _____ Zip Code _____
Your home phone _____
2. Description of issuer: Race _____ Age _____ Sex _____ Height _____ Weight _____
Hair color _____ Hair length _____
Name given you by issuer _____
Issuer claimed employment at _____
Phone number given you by issuer _____
Address _____
3. Issuer's driver's license number _____ State _____
Other I.D. used _____ Number _____
Did signature on I.D. or license appear to match the issuer's signature on check? Yes [] No []
Did issuer's appearance match photo I.D. used? Yes [] No []
4. Description of automobile involved (if any): Make _____ Model _____
Color _____ License number and state _____
5. Description of person or persons who accompanied the issuer (if any):

6. Name of other persons who witnessed the transaction and a phone number at which they can be reached:

Please check the proper response.

7. Do you recall the transaction and/or what was purchased? Yes [] No []

Did you follow company check cashing policy? Yes [] No []

8. Was the issuer known to you? Yes [] No []

If yes, how? _____

9. As the person who accepted the check, can you identify the issuer? Yes [] No []

If yes, how? _____

10. What consideration did the issuer obtain in exchange for the check?

a) Credit for a bill? Yes [] No []

b) Services? Yes [] No []

c) Cash? Yes [] No []

d) Merchandise? Yes [] No []

e) Rent or mortgage payment? Yes [] No []

Amount _____

Describe (or attach a copy of the invoice or receipt) _____

11. Was the check postdated and/or did the issuer ask you to hold the check to a future date?

Yes [] No []

12. Did you see the issuer write the check and/or endorse the check? Yes [] No []

13. Did you initial, mark upon or write upon the check at the time you accept it? Yes [] No []

If so, what? _____

Signature of person who actually accepted check

Date

I hereby understand and agree all the information contained in this document is to be used by and disseminated among all Law Enforcement Agencies, the Office of the State's Attorney, and the Courts. I also understand and agree that this check is being submitted for criminal prosecution and that if criminal prosecution is instituted, it might be necessary for those people having knowledge of the facts to appear and testify in Court.

I hereby certify that no one has accepted full or partial restitution for this particular check as of this date, and I further agree not to accept restitution without notifying the Middlebury Police Department.

I hereby certify that I have read and understand the directions for this form, and that all of the facts herein are to the best of my knowledge, true, accurate, and complete.

Date

Signature of person making report