



TOMAH POLICE DEPARTMENT

Professionalism • Integrity • Service • Character

Eric M. Pedersen – Police Chief

Jarrold M. Furlano – Assistant Chief



Worthless Check Complaint Form

Tomah Police Department
(608) 374-7400
805 Superior Ave
Tomah, WI 54660

1. No payments are allowed to be taken at your place of business after the checks have been turned into the Tomah Police Department.
2. All merchants must forward to the Tomah Police Department the following:
 - a. Original or bank copy of the involved returned check(s)
 - b. Copy of notice letter sent to check writer, along with a certified mail receipt confirming mailing of said letter
 - c. Documentation of bank fees assessed for check(s) in this submission
 - d. This form. **All questions must be answered** and form completed
3. Please complete the following questions:

Yes No Was the check returned for any reason other than **NSF** or **Account Closed**?

If indicates any other reason for return, contact the financial institution to see if an account existed. If account did exist, what does the reason for return mean. If an account never existed, please contact our agency before completing any forms.

Yes No Was the check presented to you at a different time than the services/goods received?

Yes No Was there a stop payment put on this check?

Yes No Was there an agreement to hold the check or was check postdated?

Yes No Was check for an account or a loan? (received any amount of time to pay)

Yes No Was check for partial payment or did you received partial payment on check?

Yes No If check issued to hotel/motel, was payment made prior to time of stay?

Yes No Was check a two party check?

If you have answered yes to one or more of the above questions, you will have to proceed with a civil action, not submit to our agency.

If you have more than one check signed by the same person, please fill out an additional checks attachment sheet.

Business Information:

Name of (business) complainant: _____

Business Address: _____

Telephone: _____

Address where check was issued: _____

Telephone: _____

Check Writer Information:

Name of Person Who issued Check: _____

Address: _____

Telephone: _____

Check Taker Information:

Name of person accepting check: _____
(list only the name of the person who actually accepted the check)

Was check signed in presence of person accepting it: Yes No

Check #: _____ Date Issued: _____ Amount: \$ _____

Name of bank check was drawn on: _____

Reason returned NSF Account Closed Other: _____

Number of times presented to bank: _____

Total Amount of actual fees incurred: \$_____
 (bank & certified mailing charges {you must provide documentation})

Identification used in cashing check: _____
 (D.L., date of birth, personally known)

If personally known, known by who: _____

What was purchased with check: _____

It is understood and agreed that the check(s) here attached is/are being presented to the Tomah Police Department for criminal action, not for collection and the complainant will cooperate in the prosecution of the crime herein and will not request the complaint be dismissed. If you are contacted by the issuer of the check, never advise them that criminal charges will be dropped. The facts are hereby certified as being true by the undersigned.

Date: _____

Signature of complainant: _____

(Example letter for you to send to check writer)

Date: _____

To: _____

Dear: _____:

It has come to our attention that on _____, _____ you presented check # _____, in the amount of \$_____
to this business. The _____ (name of bank) has returned this check to me because of:
_____ (NSF; Account Closed; etc.)

Please contact me within **five (5) days** from receipt of this letter, excluding holidays and weekends, to make payment for this check, plus expenses incurred by me of \$_____. There is also a charge of \$_____ to you for issuing this check.

This is the standard five-day notice requirement as stated in Wisconsin statutes section 943.24(3)(b) and (c). This section declares that the penalty for issuance of a worthless check in the state of Wisconsin is as follows:

1. For issuance of a worthless check less than \$2,500.00, a fine not to exceed \$10,000.00, imprisonment not to exceed 9 months, or both.

2. For issuance of a worthless check over \$2,500.00 or issuance within a 90 day period of checks totaling \$2,500.00 or more, a fine not to exceed \$10,000.00, imprisonment not to exceed three years and six months, or both.

In order to avoid being charged with issuance of a worthless check, we look forward to your prompt response to this request. If you do not contact me within the **five-day** time period, this check will be turned over to the **Tomah Police Department for prosecution.**

Very truly yours,

Business Waiver

(To be used with issuing of worthless check cases only)

Please review and return - keep a copy for your records

As a representative of _____, I understand that I will be informed of initial charges and final disposition of the worthless check case. I will also be supplied with restitution request information if it applies. I will be notified by subpoena of any court hearing in which my testimony is required.

By signing this waiver I understand I am also waiving my right to:

Confer with the district attorney assigned the case

Make a written or verbal impact statement at the time of sentencing.

Receive notice of any hearing

I do not require the DA's office to inform me of these rights with each singular case. I have been provided a list of rights, who to contact for change of address/phone number and a contact person.

I understand I can contact the DA's office with questions at any time regarding the worthless check case and can withdraw this waiver at any time.

Please print name: _____

Business address: _____

Signature: _____

Bank charge: _____ (amount your bank may charge you for having worthless checks

come through your account; this may be verified with your financial institution. To collect this charge or fee we will need

proof that the bank actually charged this fee)

Date: _____

Phone: _____

The Rights of Crime Victims

Wisconsin law provides crime victims with the following rights:

1. To attend court proceedings, subject to any sequestration order. The court may require victims to exercise this right by telephone or other available means, if the Victim is incarcerated, under arrest, or committed to a treatment facility, and the victim does not have a representative.
2. To be accompanied to court by a service representative, in certain cases.
3. To a speedy disposition of the case in order to minimize the length of time a victim must endure the stress of their responsibilities in connection with the case.
4. To have his/her interests considered with the court in deciding whether to grant a continuance of any hearing in the case.
5. To have his/her interests considered by the court in determining whether to exclude persons from a preliminary hearing.
6. To be provided a waiting area in court.
7. To apply for financial assistance from the office of crime victim compensation in certain cases. Assistance is available in violent crimes and does not cover property losses.
8. To be provided with appropriate intercession services to ensure that employers of victims will cooperate with the criminal justice process in order to minimize loss of income or benefits resulting from court appearances.
9. To request an order for and to be given the results of testing to determine the presence of sexually transmitted diseases or of any strain of human immunodeficiency virus (HIV) in certain cases.
10. Upon request, the opportunity to consult with the district attorney concerning the case and possible outcomes of the prosecution, including potential plea agreements and sentencing recommendation. This right does not limit the obligation of the district attorney to exercise his or her discretion concerning the handling of any criminal charges against the defendant.
11. Upon request, the opportunity at sentencing to make an oral statement or a written statement to be read, relevant to sentencing.
12. To have the pre-sentence investigation writer, in cases-in which a pre-sentence investigation is ordered, make a reasonable attempt to contact the victims.
13. To request that the court order restitution and to a civil judgment for unpaid restitution.
14. Upon request, to receive information about the outcome of the case.

15. To have any stolen or other personal property expeditiously returned by law Enforcement agencies when no longer needed as evidence. If possible, all such property, except weapons, currency, contraband, property subject to evidentiary analysis and property the ownership of which is disputed shall be returned to the owner within 10 days of being taken.
16. To complain to the department of justice concerning, the treatment of crime victims and to request review by the crime victims rights board of the complaint.

* If you want more information about Crime Victim Compensation, please contact the Victim/Witness Office.

Additional Checks Attachment for Worthless Checks

(Complete this form for each check being submitted)

Check Writer Information:

Name of Person Who issued Check: _____

Address: _____

Telephone: _____

Check Taker Information:

Name of person accepting check: _____

(list only the name of the person who actually accepted the check)

Was check signed in presence of person accepting it: Yes No

Check #: _____ Date Issued: _____ Amount: \$_____

Name of bank check was drawn on: _____

Reason returned NSF Account Closed Other: _____

Number of times presented to bank: _____

Total Amount of actual fees incurred: \$_____

(bank & certified mailing charges {you must provide documentation})

Identification used in cashing check: _____

(D.L., date of birth, personally known)

If personally known, known by who: _____

What was purchased with check: _____

