

(copy as needed)

FIVE-DAY STATUTORY DEMAND NOTICE

To: _____

Date: _____

This letter is to advise you and give you notice of an nonpayment and dishonor of a check written by you. Said check is described more fully below. This check was returned by your bank to the payee with " _____ " stamped or noted on the face of the check.

* * * * *

Check number: _____ Date: _____ Amount: _____
Pay to: _____ Signed: _____
Bank: _____

* * * * *

You are further notified that Wyoming State Statute Section 6-3-703 provides:

- (a) Any of the following is Prima Facie evidence that the person at the time he/she issued the check or other order for payment of money intended that it should not be paid:
 - (i) Proof that at the time of issuance he/she did not have an account with the drawee;
 - (ii) Proof that at the time of issuance he/she did not have sufficient funds with the drawee and that he/she failed to pay the check or other order within five (5) days after receiving notice of nonpayment or dishonor, personally given or sent to the address shown on the check or other order; or
 - (iii) Proof that when presentment was made in the reasonable time the issuer did not have sufficient funds with the drawee and he/she failed to pay the check or other order within five (5) days after receiving notice of nonpayment of dishonor, personally given or sent to the address shown on the check or other order.

- (b) Proof that the drawer opened an account with the drawee on a certain date shall be considered evidence of the drawer's knowledge of the account balance on that date.

You are also notified that if you do not pay the above described check within five (5) days of receiving this notice, excluding the date of receipt, this matter will be referred to the Sheridan County Attorney's Office for prosecution. Restitution must be made to the person or organization listed below.

Sincerely,

Name: _____

Address: _____

Phone: _____

8. Have you successfully served a five-day statutory demand notice on the passer? Yes/No
If yes, how?
Certified Mail/Sheriff's Service/Personal Service/Other:

9. Do you feel you have exhausted your ability to collect this check? Yes/No.
10. Do you feel that the passer of the check intended to defraud you when he/she passed the check? Yes/No
11. Have you retained an attorney or turned this matter over to a collection agency in an attempt to collect this check? Yes/No
12. Please note any information you feel would help in locating & prosecuting this person. _____

The decision whether or not to prosecute this individual will be made by a representative of the Sheridan County Attorney's Office who will take into account the numerous factors, including: what evidence exists showing intent to defraud, the availability of necessary bank records, etc.. Criminal prosecution does not guarantee restitution since prosecution is designed to punish the criminal offender, not collect debts. If you agree to prosecute this individual, you can not drop the charge if he/she offers to pay off the check. If a violation of criminal law can not be proven, the check will be returned to you upon request.

I hereby understand and agree that all the information contained in this report may be used by and disseminated among all Law Enforcement Agencies, the Officer of the Prosecuting Attorney and the court. I also understand and agree that this check is being submitted for criminal prosecution and that if criminal prosecution is initiated, it may be necessary for those persons having knowledge of the facts to appear and testify in court.

I hereby verify 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 obtaining the consent of the County Attorney's Office.

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

Signature of person making report

Date

Date Received: _____ Case #: _____
NSF ___ Acct Closed ___ Other _____

Name(s) on the account: _____

Make No Marks Above this line

REPORT

Part I

To be completed by the complainant making this report.

The following report should be completed for each check submitted to the Sheriff's Department or Police Department. Please make a reasonable effort to fully complete the form. If the answer to a question is not known, write "unknown".

1. Business name: _____ Business address: _____

Business phone: _____
2. Person making report: _____ Title: _____
Home address: _____ Home phone: _____

3. Full name and address of business, branch of place where check was accepted:

4. Check number: _____ Date check was accepted: _____ Amount: _____
5. Name of person who presented the check: _____

6. Please detail what steps you or your employees have taken to contact the passer and/or recover your loss:
Was the passer contacted? _____
By whom and when? _____
Where? _____
7. Has the passer attempted to make restitution? If so, please detail the circumstances.

18. Was the check post dated? _____
Did the passer ask you to hold the check to a future date? _____
Did the passer ask you not to deposit the check until a future date? _____
Did the passer indicate there might not have been enough money in the bank to cover the amount of the check? _____
If yes to any of the above, what did the passer say? _____

19. Did you see the passer write out the entire check and endorse it? _____

20. Was the check either entirely or partially pre-written? _____ If yes, what part was pre-written and what part did you see the passer write?

21. Did you initial, mark upon, or write upon the check at the time you accepted it? _____ If yes, what? _____

I hereby certify that all of the facts contained herein are to the best of my knowledge, true, accurate and complete.

Signature of person who accepted the check
Date: _____

Part II

To be completed by person who actually took the check.

1. Name: _____
2. Address: _____
Phone: _____

About the passer

3. Description: Race: _____ Sex: ___ Age: _____ Ht: ___ Wt: ___ Hair Color: _____ Hair Length: _____
4. Name given: _____
5. Address given: _____
6. Phone number given: _____
7. Claimed employment at: _____
8. Driver's License number: _____
9. Did photo on driver's license match the passer: _____
10. Other ID and number: _____
11. Description of vehicle involved (if any): Make: _____ Model: _____
____ Color: _____ License plate number: _____ State: _____
12. Names (if known) and descriptions of any persons who accompanied the passer: _____

13. Names of other persons who witnessed the transaction and their phone numbers: _____

14. Do you recall the transaction? _____
15. Was the passer known to you? ___ If yes, how? _____

16. As the person who accepted the check, can you identify the passer?
____ If yes, how? _____

17. What did the passer receive in exchange for the check?
Cash (amount): _____ Services (value): _____
Credit (value): _____
Merchandise (description & value): _____

_____ Other (explain): _____

Part III

To be completed by person making the report.

This portion of the report should only be completed for each check received which has been dated more than 60 days prior to the date this report is submitted to law enforcement. part I and II need not be submitted for checks over 60 days old unless requested by the law enforcement agency or County Attorney's Office.

The information provided in this part will be used for Police and court purposes, i.e. sentencing, screening, Department of Probation & Parole, etc.. The information may not result in prosecution.

1. Business name: _____
Business address: _____
Business phone: _____
2. Person making report: _____ Title: _____
_____ Home address: _____ Home
phone: _____
3. Full name and address of business, branch or place where check was
accepted: _____

4. Name(s), address, phone, etc. for the account as imprinted or written
on the check: _____

5. Name of Bank: _____ Account number: _____

6. Check number: _____ Check date: _____ Amount: _____
7. Date check was accepted: _____
8. Name endorsed on the signature line: _____

DO NOT SUBMIT CHECK IF COMPLETING PART III ONLY.

f. Did the personal information on the check and the description match the writer of the check? YES ____ NO ____

g. Did the signatures on the check and the identification match? YES ____ NO ____

2. Individual passing the check:

NAME _____
ADDRESS _____
CITY _____ STATE _____
PHONE NUMBER _____
AGE _____ HEIGHT _____ WEIGHT _____ SEX _____
EYES _____ HAIR: COLOR - LENGTH _____
SOCIAL SECURITY NUMBER _____
DATE OF BIRTH _____
DRIVERS LICENSE NUMBER _____ STATE _____
EMPLOYER _____

Vehicle Description: MAKE _____ MODEL _____
COLOR _____ LICENSE NUMBER _____ STATE _____

Other distinguishing marks or characteristics of individual:

I certify that the information furnished herein is correct. I request that Criminal Prosecution be instituted against the individual named above. I understand that the information I have furnished will be used for prosecution.

Dated this ____ day of _____, 19____.

Signature and position

Witness

INVESTIGATIVE FORM FOR CHECK FRAUD AND FORGERIES

This entire form **MUST BE FILLED OUT COMPLETELY** by the individual or complainant at the time the initial report is filed. If the original check is not available at the time of the initial report, a photo copy of the check **MUST** be provided and instructions that the business **WILL** provide the original check to the investigator when it becomes available.

Business or individual to whom check is payable:

NAME _____
ADDRESS _____
PHONE _____
MANAGER _____

Employee accepting check:

NAME _____
HOME ADDRESS _____
Home Phone _____
DOB: _____ SOC: _____

Other employee(s) who can identify the person passing the check:

NAME _____
HOME ADDRESS _____
HOME PHONE _____
DOB: _____ SOC: _____

1. Identification:

a. Can the person accepting the check identify the maker of the check? YES _____ NO _____

b. Did the person accepting the check watch the person when he/she signed the check? YES _____ NO _____

c. Does your business have a routine system for identifying makers of checks? EX: Do you require a picture identification with a signature on it before cashing checks? YES _____ NO _____
EXPLAIN: _____

d. Do you have other means to identify the maker of the check? YES _____ NO _____
NOTE: If you answered Yes, what means did you use to make the identification? _____

e. Did your employee look at the picture identification and did the photograph match the person who passed the check?
YES _____ NO _____

SHERIDAN COUNTY AND PROSECUTING ATTORNEY'S OFFICE
SHERIDAN COUNTY SHERIFF'S DEPARTMENT
SHERIDAN POLICE DEPARTMENT

JOINT POLICY ON NON-SUFFICIENT FUNDS, ACCOUNT CLOSED
AND NO-ACCOUNT CHECKS

Checks are an important and often used medium of payment in our society today. Unfortunately, too many times checks are not honored by the bank upon presentment because of insufficient funds, no account, payment stopped, closed account or some other reason. The problem of no payment usually lies with the issuer of the check and not with the bank denying payment.

The above named agencies recognize the importance of the problems of unpaid checks and want to do everything reasonable within our power, using the resources entrusted to us, to help the citizens of Sheridan County, and Sheridan address this problem.

In order to understand the type of assistance which can be rendered by the above agencies, a basic understanding of the different types of law is necessary. The law can be divided into two broad categories: Civil and criminal. Civil law provides a remedy between private citizens, usually in the form of monetary damages, for a person who has been wronged. In order to enforce the civil law, the person who has been wronged must file suit against the wrongdoer. While one can file suit for himself in small claims court, it is usually prudent to hire an attorney to file a suit.

Criminal law exists to provide a remedy for the State of Wyoming against the wrongdoer. The remedy is usually punishment in some form, i.e., fine, imprisonment, probation, etc. The County and Prosecuting Attorney is delegated the responsibility of bringing charges on behalf of the State of Wyoming to enforce the criminal statutes. The goal of a criminal law action is to punish the wrongdoer. In many situations, one act of a person can result in both civil and criminal liability.

When a check is returned unpaid, the holder of the check almost always has a civil law remedy against the person who issued the check under at least two legal theories:

First, when one signs a check and issues it, he makes a contract that the check will be paid. When the bank does not pay the check, the person who signed it can then be sued upon his contract. Under this theory, the holder of the check is entitled to recover the amount of the check, interest and cost but not attorney's fees. **Second**, Wyoming Statutes Section 1-1-115 provides an extraordinary remedy to collect an unpaid check. This statute provides for giving notice to the person who signed the check telling him that the check was not paid.

The person who signed the check then has fifteen days to pay the check and a collection fee of not more than \$15.00. If the check is not paid within fifteen days, the holder of the