DIRECTIONS TO MERCHANT: IF YOU HAVE MAILED THE CHECK WRITER THE NOTICE LETTER AND HAVE NOT RECEIVED A RESPONSE AFTER TEN DAYS:

(1) FILL OUT ONE COMPLAINT SHEET FOR **EACH CHECK** RECEIVED.
ATTACH A COPY OF THE CHECK AND NOTICE LETTER

(2) MAIL OR FAX THE REQUESTED ITEMS TO:
EATON COUNTY PROSECUTOR'S OFFICE, ECONOMIC CRIMES UNIT
5330 W. SAGINAW HWY., LANSING, MI 48917; FAX: (517) 543-4863

(3) KEEP THE ORIGINAL CHECK AND ANY OTHER ITEMS FOR NINETY DAYS.

(4) PLEASE DO NOT ACCEPT ANY MONEY REGARDING THE CHECK WITHOUT FIRST CONTACTING THE ECONOMIC CRIME UNIT. DOING SO MAY PREVENT FULL RECOVERY OR PROSECUTION.

ADDITIONAL COPIES OF THIS FORM CAN BE OBTAINED FROM THE ECONOMIC CRIME UNIT BY CALLING (517) 543-4647 OR ONLINE AT WWW. PROSECUTINGATTORNEY.INFO.

ECONOMIC CRIMES UNIT
EATON COUNTY PROSECUTOR'S OFFICE

CHECK COMPLAINT SHEET

Check Number:	Check Amount:	Date Issued:
Bad Check Fee Amount (if any):		Total Owed:
Check Writers Name (Person who SIGNED check):		
Name of person who accepted the check:		
Your Business Name and Address:		
Address where check passed: ☐ Same as above ☐ Other:		
Your Business Phone:		
How did you receive this check? ☐ In Person ☐ By Mail ☐ By ATM ☐ Other:		
Did you record the check writers Drivers License Number or Michigan ID number? ☐ Yes ☐ No If yes, what is the number?		
Is it your normal practice to compare identification containing a photograph with the check writer standing in front of you? ☐ Yes ☐ No		
Do you personally know the check writer? ☐ Yes ☐ No		
Could you identify the check writer in a photo lineup or in court? ☐ Yes ☐ No		
On what date did you send the bad check writer the 5-day notice?		
Do you have any additional information that would identify or locate the check writer (Social Security Number, security tape, physical description, car license number, phone number etc., use back if needed)?		

_____ _____

Witness Signature (If possible person who accepted check) Date

_____

Printed Witness Name: