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

(1) FILL OUT ONE COMPLAINT SHEET FOR **EACH DISHONORED BANK DRAFT**.
ATTACH A COPY OF THE NOTICE LETTER AND ANY OTHER PAPERWORK REGARDING THE DISHONORED BANK DRAFT.

(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) 543-4846.

(3) KEEP ANY PAPERWORK REGARDING THE DISHONORED BANK DRAFT FOR NINETY DAYS.

(4) PLEASE DO NOT ACCEPT ANY MONEY REGARDING THE DISHONORED BANK DRAFT 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

ELECTRONIC FUNDS TRANSFER COMPLAINT SHEET

Reference Number:	Draft Amount:	Date Issued:
Fee Amount (if any):		Total Owed:

Person who AUTHORIZED the draft

Name of person who accepted authorization:

Your Business Name and Address:

Address where debit authorized: ☐ Same as above

☐ Other:

Your Business Phone:

How did you receive this check?

☐ In Person ☐ By Mail ☐ By ATM ☐ Other:

Did you record the drawer's 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 drawer standing in front of you? ☐ Yes ☐ No

Do you personally know the drawer? ☐ Yes ☐ No

Could you identify the drawer in a photo lineup or in court? ☐ Yes ☐ No

On what date did you send the drawer 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