



Bad Check Case: Requirements and Procedures

The following procedure has been prescribed by the Ottawa County Prosecutor's Office. All prerequisites must be completed and all documentation forwarded to this office before a check case will be accepted by this department.

Before a bad check case will be accepted, the following prerequisites must be met:

Requirements:

1. The check has to be for an amount over \$100.00; OR
2. There are a series of checks written by the same person, with at least one of the checks being written for an amount over \$100.00; AND
3. The writer or presenter of the check can be positively identified.
4. The check has been returned from a bank or financial institution and marked NSF (Non-Sufficient Funds) or Account Closed

Procedure:

1. Notify the maker of the check that it has been dishonored. An approved *NOTICE OF DISHONOR* (page 3) is attached as a part of this packet. Complete the *NOTICE OF DISHONOR*.
2. Mail the *NOTICE OF DISHONOR* to the maker of the check by Certified Mail with Return Receipt Requested. It is also advisable that a second copy of the *NOTICE OF DISHONOR* be sent to the maker of the check by Certificate of Mailing (The local post office will assist you in this matter).
3. Retain a copy of the *NOTICE OF DISHONOR* for your records.
4. You must allow the maker of the check to have 10 days to make good on the check(s) for which *NOTICE OF DISHONOR* was sent. This is 10 days from the date on which the maker of the check received the *NOTICE OF DISHONOR* and **not** 10 days from the date that the notice was placed in the mail.
5. If the maker of the check has made no attempt to make good on the check(s) within the required waiting period, then complete and sign the attached:
 - (a) *BAD CHECK CASE PRELIMINARY ISSUES* form (page 4 & 5).
 - (b) *OTTAWA COUNTY PRESECUTOR'S BAD CHECK QUESTIONNAIRE* (page 6, 7 & 8).
6. Bring the following items to the Port Clinton Police Department:
 - (a) The original check. If for some reason the original check is unavailable, then a clear and identifiable copy of both the front and back of the check may be substituted.
 - (b) A copy of the completed *NOTICE OF DISHONOR* that was mailed
 - (c) The completed *BAD CHECK CASE PRELIMINARY ISSUES* form and *OTTAWA COUNTY PRESECUTOR'S BAD CHECK QUESTIONNAIRE*.
 - (d) The Return Receipt from the Certified Mailing of the *NOTICE OF DISHONOR*
 - (e) Certificate of Mailing
 - (f) Any other material that might be important to the investigation of the case such as work orders, telephone bills showing calls to the maker of the check and/or receipts for items delivered.

Once this department is in receipt of ALL of the above, a case file will be opened and a report prepared. Once the report is completed, it and copies of all relevant material will be forwarded to the office of the Ottawa County Prosecutor for consideration of charges.

Please be advised that the Port Clinton Police Department is not in the business of collecting money that is owed. Our sole function in bad check cases is to prosecute criminal wrongdoers. In the event that a full or partial payment is made toward satisfaction of this matter by the maker of the check, you MUST notify this department immediately as the Prosecutor must be notified of that fact.

Also, please realize that once criminal charges are filed, only the Prosecutor can dismiss them. Once you commence a criminal prosecution, you must follow through with it.

NOTICE OF DISHONOR

(Section 2913.11 Ohio Revised Code)

Date: _____

To: _____

From: _____

Re: Check No. _____ Dated: _____ Amount: _____

Payable To: _____

Drawn By: _____

Dear _____,

**You are hereby given notice of dishonor of check No. _____ dishonored
by the _____ Bank said date _____.**

**Your failure to make good this check or otherwise satisfy this instrument within ten (10)
days after receiving this official notice of dishonor could be a violation of Section
2913.11 of the Revised Code of the State of Ohio, which describes the criminal offense
of Passing Bad Checks.**

**If you have any questions concerning the effect of a possible violation of Section
2913.11 of the Ohio Revised Code, I suggest you contact your lawyer.**

Sincerely,

Signature: _____

Printed Name: _____

Preparer: Use Certified Mail with return receipt and also
use Certificate of Mailing

BAD CHECK CASE PRELIMINARY ISSUES

- Please answer the following questions.
- Use one of these forms for **each** check to be presented.
- If you answer **all** of the following questions with a “yes” answer, then proceed with the Bad Check Questionnaire.
- Return this form and the Bad Check Questionnaire and all other required documents to the Port Clinton Police Department.
- If you answer **No** to any of the following questions, then do not proceed with the Bad Check Questionnaire as the Ottawa County Prosecutor’s Office will not accept the case for prosecution. You may proceed with an action in Ottawa County Municipal Court by filing a small claims action in that court.

- | | | | |
|-----|--|------------------------------|-----------------------------|
| 1. | Is the check written for \$100.00 or more; or, if there is more than one check written by the same offender, is at least one of the checks written for \$100.00 or more. | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| 2. | Was the check dishonored? | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| 3. | Was the check dishonored because the account was closed or for non-sufficient funds? | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| 4. | Was a Notice of Dishonor sent? | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| 5. | Was the Notice of Dishonor sent at least 20 days ago? | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| 6. | Was the Notice of Dishonor sent by Certified Mail, Return Receipt Requested? | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| 7. | Was the Notice of Dishonor sent by Certificate of Mailing on the same date as item 6 above? | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| 8. | Do you have all of the following? | | |
| | a. The original check | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| | b. Copy of Notice of Dishonor | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| | c. Return Receipt or envelope marked “Returned or Unclaimed” | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| | d. Receipt from Certificate of Mailing | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| 9. | Can we prove who wrote the check by photograph, use of picture ID, or by personal ID by clerk? | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| 10. | Is at least \$100.00 still owing to you on this check? | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| 11. | Was something of value given in exchange for the check? | <input type="checkbox"/> Yes | <input type="checkbox"/> No |

Again, if you have answered **Yes** to each of these questions, then complete the *OTTAWA COUNTY PRESECUTOR'S BAD CHECK QUESTIONNAIRE*. Forward this document (*BAD CHECK CASE PRELIMINARY ISSUES*), the *OTTAWA COUNTY PRESECUTOR'S BAD CHECK QUESTIONNAIRE* and all other required items (i.e. Return Receipt, Certificate of Mailing Receipt, Original Check, etc.) to the Port Clinton Police Department.

(Signature and Title)

(Date)

WARNING: **FALSE INFORMATION MAY SUBJECT THE
AUTHOR TO PROSECUTION**

OTTAWA COUNTY PROSECUTOR'S OFFICE

BAD CHECK QUESTIONNAIRE

- State your name, address and phone number:

Name: _____

Address: _____

Phone: _____

- Face amount of the check you were given: _____
- Bank or Financial Institution check was drawn on: _____
- Check made payable to whom: _____
- Name of person(s), corporation, or other association on whose account this check is drawn:

- Check signed by whom: _____
- Date on check: _____
- Date you obtained check: _____
- Date check deposited or cashed: _____

- Did you notify the maker of the check that check had been returned marked insufficient funds or account closed:

Yes No Date _____

- How did you inform maker of the check that the check had been dishonored?

In Person By Phone By Regular Mail
 By Certified Mail Other _____

- Do you have the original copy of the check(s)? Yes No

✓ If no, who has the original check(s)?

- How did you come into possession of the check(s)?

Received through the mail
 Received in person from maker of check
 Received in person from an agent of maker of check
 Name of such person: _____

- Check given in payment for: _____

- City/County and State where you received check:

- Did the person write the check in your presence? Yes No

- Was check pre-signed? Yes No Don't Know

- Was check post-dated? Yes No Don't Know

- Were you told by the maker of the check that there were insufficient funds in his/her account to cover this check? Yes No

- Has the maker of this check made any payments towards the face amount of the check? Yes No

✓ If so, please list the dates and amounts of such payments:

- Present address of maker of check:

- At the time the check was made out, was there an open account in the name of the maker of the check at the bank or other financial institution? Yes No

- Do you suspect that any portion of the check has been forged? Yes No
✓ If so, which portion: _____

- Do you know of any other facts which might help in this matter: _____

- How was the presenter of the check identified?

Picture ID:

 Yes
 Yes No
 No

Maker known personally by recipient:

Other: _____

Please provide this office with original check or a good, clear copy of both sides of the check in question. Thank you.

WARNING: FALSE INFORMATION MAY SUBJECT THE AUTHOR TO PROSECUTION

Signature: _____

Date: _____