

CHECK FRAUD QUESTIONNAIRE

INSTRUCTIONS: This questionnaire **MUST** be filled in completely by the person who **ACCEPTED** the check and/or the person who **APPROVED** acceptance of the check. There are certain questions as to identification of the presenter of the check which only the **ACCEPTOR** or **APPROVER** can answer. If the information is incomplete or lacking, the District Attorney may not decide to bring criminal charges.

Check # _____ Amount \$ _____ Date _____ Case Number _____

Victim _____ Address _____ Phone: _____
E Mail _____ Cell: _____

1. Name, address, and telephone numbers of person who received the check, and of the person who approved receipt of the check.

A) Person who **RECEIVED** check _____ Address _____
DOB: _____ Phone: _____

B) Person who **APPROVED** check _____ Address _____
DOB: _____ Phone _____

2. Was the check delivered in person _____ or by mail _____

3. Where was check received _____

4. Was check returned insufficient funds _____ or was the check drawn on closed account _____

5. Date check deposited _____ Returned unpaid or refused by bank _____

6. Total Amount of Purchase \$ _____ Value of service/msde delivered \$ _____
How much cash was delivered _____ Describe service/msde delivered or attach a copy
of receipt _____

7. Was presenter of check known by either the person who received the check or the person who approved acceptance of the check? Yes _____ No _____ Explain: _____

8. Was the check filled out and signed by presenter in the presence of the person who accepted/approved acceptance of the check? Yes _____ No _____.

9. Was it a single party check? Yes _____ No _____

10. Was the check dated the same day it was delivered to the victim? Yes _____ No _____

11. Was the check dated for a date in the future? Yes _____ No _____

12. Were you asked to hold check for a period of time until money was put into the account, or until the presenter got some money or funds from another source? Yes _____ No _____

13. What efforts have you made to collect on the check?

(A) Phone call _____ How many _____ When _____ What telephone number _____

(B) Personal contact _____ How many _____

(C) Collection Agency _____ Name of Agency _____

(D) Filed lawsuit in court _____ Case number _____

14. Has any restitution been received? Yes ___ No ___ If yes, how much? \$ _____

15. Was the check given for payment in part or full on a charge account? Yes ___ No ___

16. Was the check given for an old (90 days or more) unpaid debt? Yes ___ No ___

17. Was check payment on another insufficient funds check in whole or in part? Yes ___ No ___

18. Were identification documents presented to verify identity? Yes ___ No ___
If yes, describe type: Drivers License _____ Military ID _____ Other _____
Document Number: _____ Issued by: _____

19. Did you note the document number anywhere? Yes ___ No ___ Where _____

20. Did you compare the photo on the ID with the person presenting the check? Yes ___ No ___
If yes, did the person appear to match the photo? Yes ___ No ___

21. Give a full description of the person delivering the check:

Name _____ Alias _____ DOB _____
Address _____ Phone _____ Race _____
Sex ___ Age ___ Height ___ Weight ___ Hair ___ Eyes ___ Build _____
Complexion _____ Glasses _____ Dress _____
Where employed _____ Occupation _____
Other ID exhibited _____

22. Auto description: Make _____ Model _____ Year _____ Color _____
License Number _____ State _____ Style _____ Condition _____

23. Name of person completing this form: _____ DOB: _____
_____ DOB: _____

* If not completed by the person **ACCEPTING/APPROVING** the check, (See Instructions)
please state reason: _____
