

## La Crosse County District Attorney's

## Check Complaint Form

## **Check Enforcement Program**

Submit to:

District Attorney's Check Enforcement Program 333 Vine Street, Room 1100 La Crosse, WI 54601

VICTIM IN	FORMATION
Victim Company/Organization/Individual Name	Phone No
The undersigned states that he/she has actual knowledge of the facts stated below and believes that they are true as presented. Further, the undersigned relinquishes all rights for acceptance of restitution unless directed by the District Attorney's Office. The undersigned confirms that he/she has authority to act for any organization for which he/she is making this referral.	
	☐ Certain checks are civil rather than criminal
Print Name: Title:	issues. Please check this box to verify that no check(s) submitted were post-dated or accepted
Signed: Date:	as payment on an account and that there was no
	agreement to hold any check.
CHECK-WRITER INFORMATION ————————————————————————————————————	
Name: First Middle	Last Suffix
Address	Phone Number(s)
City State Zip	Date of Birth: Gender: M $_{\square}$ F $_{\square}$
Physical description:	Work Phone:
Driver's License # State W	Where Issued E-mail:
Please list any additional information to help identify or locate the check writer:	
Overline	
IMPORTANT IS IN THE	ng Checks: Non-qualifying Checks  • Postdated, pre-dated or altered
, all sullicit	reflicient funds  parties knew there were  Checks
the check can positively identify the check writer. If possible. • Closed	Account the transaction existing debt
list the name of the person who can positively identify the check writer for each check below.	Stop payment checks     Refer-to-Maker checks
check writer for each check below.	FORMATION
Reason check was dishonored:   NSF  Account Closed  No Account  Was partial payment	
Was photo ID	accepted? □ Yes □ No
Ck. No. Date passed Amount verified? Y/N	Person who accepted check If yes, what amount?
\$ Can the per	srson who accepted this check positively identify the check writer?
2 Reason check was dishonored:   NSF Account Closed No Acco	accented = Vec = No
Was photo ID Ck. No. Date passed Amount verified? Y/N	Person who accepted check If yes, what amount?
\$	\$
Call tile per	rson who accepted this check positively identify the check writer?    Yes   No
Reason check was dishonored:   NSF  Account Closed  No Account	
Was photo ID Ck. No. Date passed Amount verified? Y/N	accepted? ☐ Yes ☐ No Person who accepted check If yes, what amount?
Ck. No. Date passed Amount verified? Y/N \$	Person who accepted check If yes, what amount?
Can the person who accepted this check positively identify the check writer? u Yes u No	
Reason check was dishonored:  NSF Account Closed No Account Was partial payment	
Was photo ID	accepted? □ Yes □ No
Ck. No. Date passed Amount verified? Y/N	Person who accepted check If yes, what amount?
\$ Can the per	son who accepted this check positively identify the check writer?   Yes   No
Call lie Dela	30N WNO accepted this check positively identity the check writer: 📋 tes 📋 ino