

BAD CHECK CRIME REPORT YORK COUNTY DISTRICT ATTORNEY TOM KEARNEY

Bad Check Program Address: P.O. Box 20908 York, PA 17402-0194

Bad Check Program Contact: (866) 909-8431 - Merchant Hotline

(866) 434-1440 - Check Writer Hotline (Please refer check writer to the "check writer" hotline)

For more information: www.checkprogram.com/yorkcountypa

Step	The following types of checks are ineligible for the program:											
1				y re-paid checks		^k Fraudulent or stamped lost/stolen/forged ^k Checks you agreed to hold before depositing						
Confirm Eligibility	*Payroll checks	·1 6 (e dated or altered c	hecks *	Checks you	agreed to hold befo	ore depositing				
Englointy	*Checks passed outs	side of your county	1									
Step	Victim/Merchant N	Name:										
2	Contact Name: Title:											
Victim	Victim Contact Information: Email:											
Information	(Required)	or mation.										
	_		Phone:()_									
	• <u>Email and/or fax are required for</u> acknowledgement receipt of check and/or Program communication											
	Address:State:Zip Code:											
	Pennsylvania Statu conspicuously displ Is a notice of your s If yes, what is the se	tte 4105(e-3) prov layed on your pre service fee conspi	ides for the recover mises. *Please refe cuously displayed o	y of a bad check s r to the back of t n your premises?	service fee pr his report for '	ovided that an explanat	notice of this serv	ice fee is				
Step	Check Writer's Nan	ne:				Driver's L	icense # / Other ID #	#:				
				• •		·····						
3	Address:			Apt:		State:	Date of Birth:					
Check Writer	City:		State:	Zip Code:			//_					
Information												
	nome r none:(.)	Other Flione:(_)								
	Written notice must be s (See sample notice on ba		check(s) in question. If a	o attempt has been m	ade, the check is	not eligible for	prosecution.					
	(See sample notice on bar	(CK.)										
Step	<u>Ck. No.</u> <u>Da</u>	ate Passed	<u>\$ Amount</u>		Derson accept		<u>Can per</u> check wr					
4					1 2 1	0 /						
Check							- Yes	No				
Information							Yes	□ No				
							- Yes	No				
	Address where check	x was accepted (if di	ifferent than above in	Step 2):				(Required)				
	City:		State:	Zip Code:				_				
				i								
C1	• I will <u>not</u> accept of	direct payment from	the check writer after f	iling this report with	the Program. P	lease refer che	ck writer to (866) 434	4-1440.				
Step	• I understand that	the check writer has	the option to dispute th	nis claim in writing w	vith the Bad Ch	eck Program.						
5	 If this crime report is not completely filled out it may prevent or delay this case from moving forward for prosecution review. I attest that I have sent notice to the check writer and after 10 days it remains unpaid. 											
Victim												
Verification	• I have reviewed the filing instructions, I hereby affirm and attest <u>under penalty of perjury</u> , that all information provided on this crime report is true to the best of my knowledge.											
Sign & date	•	KIIOWICUZE.										
Sign & date	XSignature of Por	mon Filing (Dear		Drint No	o of Domoor T	ling	Doto File					
	Signature of Per	rson Filing (Requ	nrea)	Print Nam	e of Person F	uing	Date File	a				

Staple original or bank-generated substitute check here

Sample "Courtesy Notice"

Date

Dear Check Writer:

You are hereby	notified that a check numbered	in the face amount of \$, issued by you on	drawn upon	bank, and
payable to	, has been dishonored. You hav	e 10 days from receipt of this not	tice to tender payment of t	he full amount of such chec	k plus a service
charge of \$, the total amount due being \$				

Unless this amount is paid in full within the time specified above, we may turn over the dishonored check and all other available information relative to this incident to the District Attorney's Office for potential criminal prosecution.

Closing, Your name/address

Service Fee

Per Pennsylvania Consolidated Statute 4105(e-3), the maximum fee that may be charged for a return check is \$50.00. If you charge a fee, (to recover postage and other handling costs) that fee and the return check fee your bank charges constitutes your service fee and may not exceed \$50.00. You must have a written notice of the service fee conspicuously displayed on the premises when check was issued (i.e. by your cash register/checkout).

*The only exception is if the fee your bank charged exceeds \$50.00, then you may recover the actual fee charged, but only that fee.

Bad Check Program Information

As a victim of a bad check you may file this report with the York County District Attorney, provided there is sufficient information, and that the check meets all eligibility guidelines. The York County District Attorney's Office will seek full restitution for victims whenever possible; however, please keep in mind that the Bad Check Restitution Program can make no recovery guarantees. By submitting the check to the program you surrender control of the check to criminal process and forego the opportunity to pursue civil debt collections.

Check writers are encouraged to make payments in full. Should a partial payment be received, the payment will be allocated between the victim and the Bad Check Program. "Restitution" refers to the face value of all checks listed on this report along with all "stated" bank charges assessed by your bank.

A check will be deemed ineligible and returned to you to pursue a civil remedy, if a filed check is later determined to be:

- A stop payment check where the issuer acted in good faith and with reasonable cause in stopping payment,
- A check issued by someone not competent or of legal age,
- A check dishonored due to bank error or failure to notify the check writer of bank adjustment of a check,
- A check issued to pay an obligation arising from an illegal transaction.

What to do after my crime report is filed with the Program

- Please do not accept direct payments from check writers. Should the check writer contact you to make payment, refer them to the Check Writer Hotline at (866) 434-1440.
- You may contact Merchant Care for case updates at (866) 909-8431.
- Please allow a minimum of 90 days to pursue restitution.
- If the check writer does not comply with the Program, the case may be reviewed for possible criminal prosecution.
- If we are unable to recover restitution and/or the check is not "eligible" for prosecution, you may request the check(s) be returned to pursue a civil remedy.

Filing Instructions

1. Fill out Report Completely.

- Attach checks and all supporting documents such as CERTIFIED MAIL RETURN RECEIPT OR UNDELIVERED LETTER, COPY OF 2. "COURTESY NOTICE." "RETURN ITEM" NOTICE FROM THE BANK (WITH FEES).
- 3. Mail Bad Check Crime Report and all other correspondence to:

York County Bad Check Restitution Program

P.O. BOX 20908, York, PA 17402-0194

Once a report has been filed: ALL restitution payments must be coordinated by the District Attorney's Office. Should the check writer contact 4. you to make payment, direct them to the Bad Check Restitution Program at (866) 434-1440.

DO NOT ACCEPT PAYMENT DIRECTLY FROM CHECKWRITER.