TI VERTON POLI CE DEPARTMENT

Fraudulent Check Complaint Package



Fraudulent Check Complaint

Instruction Packet

If a check is returned by a bank for Insufficient Funds, Account Closed, No Account Found, Stop Payment, or Refer to Maker, the Tiverton Police Department requires that certain steps be followed before a criminal investigation can be initiated. The Tiverton Police Department will not be able to prosecute banking law violations unless a positive identification can be made of the person writing the check by the individual who actually received the check. Valid identification must be obtained from the person writing the check at the time of receipt. Valid forms of identification are a state driver's license, a state identification card, or a military ID. It is your responsibility to ensure the identification matches the check writer's and you record the ID state and number, date of birth and telephone number and verify the address on the check. You may also note the check writer's vehicle description and registration, and their physical description.

The Tiverton Police Department cannot accept the following types of checks for criminal prosecution:

- a. Checks under \$50.00
- b. Checks after ninety (90) days from the date of issuance
- c. Third (3rd) party checks
- d. Checks for rent, services rendered, or repayment of loans
- e. Checks received by mail

If the dollar amount of the check is less than \$50.00, we recommend that you pursue the matter in Small Claims Court or a collection agency as a civil matter. You may contact the Second Division District Court Clerk's Office, Murray Judicial Complex, 45 Washington Square, Newport, Rhode Island 02840-2973 (401-840-8350).

If the check's dollar amount is in excess of \$50.00 and has been deposited through normal channels, please complete the following steps:

Checks returned marked Insufficient Funds, Account Closed, or No Account Found:

1. Send a letter demanding payment via Certified Mail to the check writer's current address (see attached sample letter).

- 2. You will then receive either a Domestic Return Receipt (green card) signed by the recipient or the unopened letter marked Unclaimed, Moved-No Forwarding Address, etc.
- 3. If the letter was accepted, you must allow seven (7) days for the check writer to make restitution. If after seven (7) days, restitution is not made you may file a criminal complaint with the Police Department. If the letter was not accepted, you may also file a criminal complaint with the Police Department.
- 4. Complete the enclosed Fraud Check Complaint Form and submit it to the Police Department with the following support materials:
 - a. The original check
 - b. The green Domestic Return Receipt or the unopened letter
 - c. A Witness Statement completed by the receiver of the check who will be able to positively identify the maker. Refer to the attached witness statement and example statement below.
 - d. A copy of the letter sent to the check writer.
- Return all documents to the Tiverton Police Department, 20 Industrial Way, Tiverton, RI 02878.
 An officer will be assigned to investigate your case.

Checks returned marked Stop Payment or refer to maker:

- 1. Send a letter demanding payment via Certified Mail to the check writer's current address demanding restitution or the return of merchandise within seven (7) days.
- 2. Follow steps 2-5 from above.

Once you have filed a criminal complaint with the Police Department, DO NOT accept any payments from the check writer. Refer them to the investigating police officer. If you accept payment or partial payment, the matter becomes civil and criminal prosecution will be declined or terminated. If restitution is made and the Police Department is not notified, you could suffer civil ramifications.

If all of the reporting requirements are met and there is sufficient evidence that the check was passed with the intent to defraud and the suspect can be positively identified, our criminal investigation will commence. The complainant will be required to attend any and all court proceedings.

*The Tiverton Police Department strongly suggests that you or your company obtain the means of photographing or recording the transaction in order to capture an image of the check maker. This means of positive identification can protect you, your company, and the Police Department from false arrests and/or law suits which can arise from improper identification.

Sample Witness Statement

On <u>07/26/2013</u> I was working as a cashier at <u>Joe's Supermarket</u> and was on duty. At approximately <u>12:30 pm</u>, a person paid for <u>food items</u> with a personal check. The amount of the <u>goods</u> was <u>\$54.00</u>. I asked the person for identification and <u>he/she</u> produced a <u>Rhode Island Driver's License, number 123456</u>. The person matched the photo in the identification. I processed the check through normal channels in

the business. I was later informed that the check was returned for <u>insufficient funds</u>. I wish to pursue criminal charges against this person.

Sample Letter

Notice of Dishonored Check	
Date:	
Name (Check Writer):	
Address (Check Writer):	
You are according to law hereby notified that check numbered	and dated
, drawn on (name of bank)	in the amount of
<i>\$, has been returned unpaid with a notatio</i>	
because of NSF, Stop Payment, Refer to Maker, or other. Within seve	en (7) days from the mailing of this
notice, you must pay to (your name or business name)	at
(address)	
(amount of check) and the amount of	
(additional service charges). If payment is not made within seven (7) complaint will be filed with the Tiverton Police Department, and a wo) days of this notice, a criminal
Signature of the complainant:	

Fraudulent Check Complaint Form

On	(Date check written) (Name of check w			of check writer)			
presented ch	ed check (s) numbered in the amount of \$						
to	o <i>(Name of Business)</i> located at						
	(Business address) as payment for merchandise and or services.					d or services.	
The check wa	The check was drawn on (Name of bank) and returned with the following				following		
notation (s)							
On	(Date) a certified letter was sent to (Name of check write)				of check writer)		
(Name of check writer) used the following identification to issue:							
License # :	6	State:		DOB:		SS #	
					•		
I request that the Tiverton Police Department investigate this complaint and to prosecute in accordance with Rhode Island General Law as amended.							
Complainant	Signature:					Date:	

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Statement Form



Case #:	Page #:		Officer Badge #:	Date:			
First Name:		Last N	ame:		MI:		
Street Address:		City:		State:	Zip Code:		
Home Phone #:			Cell Phone #:				
Date of Birth:	Date of Birth:			Social Security Number:			
Statement Type:	Witness		Victim	MV Accident			
I VOLUNTARILY, WIT	HOUT THREATS OF	R PRON	HISES, MAKE THE FOLL	OWING STAT	EMENT:		
				T			
Signature:				E	Date:		
Officer Signature:		-		E	Date:		

Use Statement Continuation Form for additional pages. Do not use back of page.

Tiverton Police Department * 20 Industrial Way* Tiverton, RI 02878 * Phone: (401) 625-6717 * Fax: (401) 816-5551 Rev. 02/2016 TPD 13-134

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Statement Continuation Form



Case #:	Page #:	Officer Badge #:	Date:
I VOLUNTARILY, WITH	OUT THREATS OR PRON	AISES, MAKE THE FOLLO	WING STATEMENT:
Signature:			Date:
Officer Signature:			Date:

Use Statement Continuation Form for additional pages. Do not use back of page.

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