

CHECKLIST

PLEASE FILL OUT THIS FORM AS THOROUGHLY AS POSSIBLE TO AID IN PROSECUTION

You may be asked to swear, under oath, to the accuracy of this document.

CHECK INFORMATION

ACCOUNT HOLDER	
CHECK AMOUNT	
DATE OF CHECK	
CHECK NUMBER	
NAME OF PAYEE	
BUSINESS ADDRESS AND PHONE	
CHECK PRESENTED FOR CASH OR MERCHANDISE <i>(select only one)</i>	

IDENTITY INFORMATION

PERSON WHO ACCEPTED CHECK	
ADDRESS AND PHONE NUMBER	
DATE CHECK WAS ACCEPTED	
WAS CHECK POSTDATED <i>(yes or no)</i>	
PAYMENT ON ACCOUNT <i>(yes or no)</i>	
MORE THAN 90 DAYS OLD <i>(yes or no)</i>	
TWO-PARTY CHECK <i>(yes or no)</i>	
CAN PERSON WHO ACCEPTED CHECK IDENTIFY PASSER OF CHECK? <i>(yes or no)</i>	
WAS IDENTIFICATION MADE OF PASSER OF THE CHECK BY PHOTOGRAPH IN A DRIVER'S LICENSE OR OTHER PICTURE IDENTIFICATION? <i>(yes or no)</i>	

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OBTAIN AND VERIFY ISSUER'S DATE OF BIRTH? <i>(yes or no)</i>	
VERIFY DRIVER'S LICENSE NUMBER, MN ID, or TRIBAL ID NUMBER? <i>(yes or no)</i>	
VERIFY CURRENT ADDRESS? <i>(yes or no)</i>	
OBTAIN A FULL NAME OF THE PRESENTER? <i>(yes or no)</i>	

DOES THE BUSINESS HAVE VIDEO OR OTHER RECORDINGS SHOWING THE TRANSACTION? <i>(yes or no)</i>	
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NOTICE REQUIREMENTS

REASON CHECK WAS RETURNED BY BANK? <i>(Select one: non-sufficient funds, account closed, or forgery)</i>	
WAS PERSON NOTIFIED BY CERTIFIED MAIL, RETURN RECEIPT, OR 1 ST CLASS MAIL COPY OF LETTER ATTACHED <i>(yes or no)</i> . IF NO, WHY?	
COMMENTS REGARDING ATTEMPTS TO CONTACT THE ISSUER OR RELATING TO IDENTITY	
NAME OF PERSON COMPLETING THIS FORM	
POSITION WITH PAYEE	

FOR OFFICE USE ONLY:

ACCEPTED FOR DIVERSION	
DECLINED PROSECUTION	
REFERRED FOR IMMEDIATE PROSECUTION	