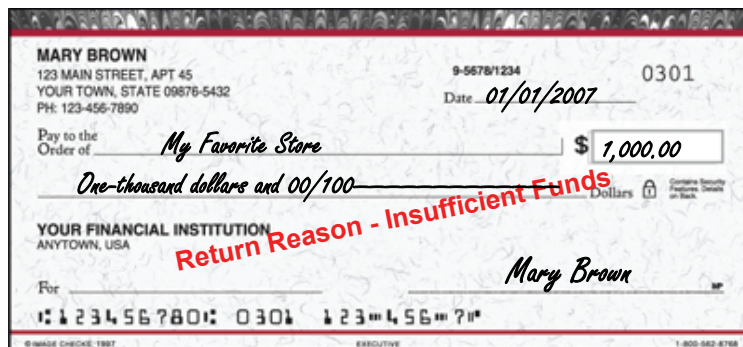




# Fraudulent Check Information Packet



# GLENWOOD SPRINGS POLICE DEPARTMENT

101 WEST 8TH ST, GLENWOOD SPRINGS, COLORADO 81601

PHONE: (970) 384-6500 FAX: (970) 928-0162

[www.glenwoodpolice.com](http://www.glenwoodpolice.com)

## Message from the Chief

**\*Effective immediately:** GSPD will only initiate an investigation where the combined value of all checks written is greater than \$5,000.00. If your complaint involves checks having a combined value of less than \$5,000.00, please file a complaint through the 9th Judicial District Attorney's Office at: [www.checkprogram.com/9thjudicialco](http://www.checkprogram.com/9thjudicialco)

Before you consider reporting fraudulent checks to a law enforcement agency, a distinction must be made between **CIVIL** and **CRIMINAL LAW**.

Under Civil Law, C.R.S. 13-21-109, Recovery of Damages, the law provides that the issuer of any bad check is liable to the victim for **TRIPLE** the amount of such checks, but in no case less than \$100.00. These actions are easily filed in civil courts.

The 9th Judicial District Attorney's Office has determined that checks turned in for criminal prosecution **MUST** meet the requirements set forth below; additionally, the prosecution of fraudulent checks is at the discretion of the District Attorney's Office.

1. A **Colorado Driver's License** is required, and the person accepting the check compared the photo on the driver's license and it matched the passer of the check. Out-of-state driver's licenses, out-of-country driver's licenses, identification cards, and passports are not accepted forms of identification.
2. The check bears the Colorado Driver's License number and the initials of the person accepting the check, home phone number of the passer, and the person accepting the check can identify the passer out of a photo line-up consisting of 6 persons of like descriptions.
3. No money has been paid toward the check and no arrangements were made to hold the check.
4. A certified letter was sent to the passer and a copy of the letter, mailing receipt, and "green" USPS Domestic Return Receipt is attached to the original check and this form.
5. Is the victim/ business a corporation, partnership, or sole proprietor?
  - a. If it's a corporation, needed is the official name and State of incorporation, as well as a list of directors and all officers, including a complete list of addresses and phone numbers.
  - b. If it's a partnership, needed is the partnership name and the addresses and the names of all the general partners.
  - c. If it's a sole proprietor, needed is the full name of the proprietor, his/ her address and phone number and a copy of a trade name affidavit, if one exists.

6. The name, address and phone number of the bookkeeper, accountant or comptroller for the business.
7. An itemized list of what goods, services or other items were obtained by use of the check, e.g., groceries, cash, clothing, and services.
8. Checks will not be accepted under the following circumstances:
  - a. **Combined value of all checks written is less than \$5,000.00.**
  - b. Any checks more than 60 days old.

If the above requirements are not met, **DO NOT** submit to the Glenwood Springs Police Department for criminal prosecution. Instead, you have the option of either filing a report directly with the 9th Judicial District Attorney's Office by visiting: [www.checkprogram.com/9thjudicialco](http://www.checkprogram.com/9thjudicialco) You also have the option to seek civil remedies under Civil Law, C.R.S. 13-21-109, Recovery of Damages.

If the above requirements are met, please complete the attached forms and return to the investigating supervisor listed below. All forms must be completed in their entirety and your full cooperation will be necessary.

Sincerely,

Terry L. Wilson  
Chief of Police  
Glenwood Springs Police Dept.

Investigating Supervisor: Detective Sergeant Dan Aklinski  
(970) 384-6504

Date submitted to Complainant: \_\_\_\_\_





# FRAUDULENT CHECK COMPLAINT FORM

## VICTIM / COMPLAINANT INFORMATION

Company Name \_\_\_\_\_  
(If an individual, enter name.)

Address \_\_\_\_\_

Phone \_\_\_\_\_ Fax \_\_\_\_\_

Complainant Name \_\_\_\_\_ Date of Birth \_\_\_\_\_

Address \_\_\_\_\_

Home Phone \_\_\_\_\_ Cellular Phone \_\_\_\_\_

The undersigned states that s/he 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.

Print Name: \_\_\_\_\_ Title: \_\_\_\_\_

Signed: \_\_\_\_\_ Date: \_\_\_\_\_

Certain checks are civil rather than criminal issues. Please check this box to verify that no check(s) submitted were **post-dated** or accepted as **payment on an account** and that there was no **agreement to hold** any check.

## CHECK-WRITER INFORMATION

Name: First \_\_\_\_\_ Middle \_\_\_\_\_ Last \_\_\_\_\_

Address \_\_\_\_\_ Home Phone \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ ZIP \_\_\_\_\_ Gender:  Male  Female

Employer \_\_\_\_\_ Work Phone \_\_\_\_\_

Driver's License # \_\_\_\_\_ State where license issued \_\_\_\_\_

• Do you have any surveillance footage available of the check-writer and/or transaction?  Yes (please provide)  No

• Please list any additional information to help identify or locate the check-writer:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**IMPORTANT:** It is important to try to establish positive ID. It can be done two ways: (1) If photo ID is verified and noted on the check, or (2) If the person taking the check can positively identify the check writer.

QUALIFYING CHECKS	NON-QUALIFYING CHECKS
<ul style="list-style-type: none"> <li>• Insufficient Funds or "NSF" Non-sufficient Funds checks</li> <li>• Checks written on Closed Accounts</li> <li>• Checks written on No Account</li> <li>• Counterfeit or Forged checks <i>(These crimes are charged under a different section of the Colorado Revised Statutes. Please contact GSPD at 384-6500 to file a report.)</i></li> </ul>	<ul style="list-style-type: none"> <li>• Checks passed when both parties knew there were insufficient funds at the time of the transaction</li> <li>• Post-dated, pre-dated, or altered checks</li> <li>• Stop payment checks</li> <li>• Checks written towards a pre-existing debt</li> <li>• Checks older than 60 days</li> <li>• Checks previously submitted to a Collection Agency or Civil Attorney</li> </ul>

**CHECK INFORMATION**

**1** Reason check was dishonored:  NSF  Account Closed  No Account  Other: \_\_\_\_\_  
 Was partial payment accepted?  Yes  No If yes, what amount? \$ \_\_\_\_\_.

Check No. _____	Date/ Time Passed _____	Amount: \$ _____	Was Photo ID Checked and Verified? <input type="checkbox"/> Yes <input type="checkbox"/> No	Person who accepted the check: _____ (Person must complete Witness Form)
Can the person who accepted this check positively identify the check writer? <input type="checkbox"/> Yes <input type="checkbox"/> No				

**2** Reason check was dishonored:  NSF  Account Closed  No Account  Other: \_\_\_\_\_  
 Was partial payment accepted?  Yes  No If yes, what amount? \$ \_\_\_\_\_.

Check No. _____	Date/ Time Passed _____	Amount: \$ _____	Was Photo ID Checked and Verified? <input type="checkbox"/> Yes <input type="checkbox"/> No	Person who accepted the check: _____ (Person must complete Witness Form)
Can the person who accepted this check positively identify the check writer? <input type="checkbox"/> Yes <input type="checkbox"/> No				

**3** Reason check was dishonored:  NSF  Account Closed  No Account  Other: \_\_\_\_\_  
 Was partial payment accepted?  Yes  No If yes, what amount? \$ \_\_\_\_\_.

Check No. _____	Date/ Time Passed _____	Amount: \$ _____	Was Photo ID Checked and Verified? <input type="checkbox"/> Yes <input type="checkbox"/> No	Person who accepted the check: _____ (Person must complete Witness Form)
Can the person who accepted this check positively identify the check writer? <input type="checkbox"/> Yes <input type="checkbox"/> No				

**4** Reason check was dishonored:  NSF  Account Closed  No Account  Other: \_\_\_\_\_  
 Was partial payment accepted?  Yes  No If yes, what amount? \$ \_\_\_\_\_.

Check No. _____	Date/ Time Passed _____	Amount: \$ _____	Was Photo ID Checked and Verified? <input type="checkbox"/> Yes <input type="checkbox"/> No	Person who accepted the check: _____ (Person must complete Witness Form)
Can the person who accepted this check positively identify the check writer? <input type="checkbox"/> Yes <input type="checkbox"/> No				

The preceding information is true and correct to the best of my knowledge and I understand the information is being provided to the Glenwood Springs Police Department in order to conduct a criminal investigation which may lead to prosecution of the check-writer. I will not accept any restitution unless authorized by the District Attorney's Office.

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

# FRAUDULENT CHECK WITNESS FORM

1. Witness Name: \_\_\_\_\_  
Last First Middle

2. Date of Birth: \_\_\_\_/\_\_\_\_/\_\_\_\_ 3. Sex: M / F (Circle one)

4. Business Name: \_\_\_\_\_

5. Business Address: \_\_\_\_\_

6. Business Phone: \_\_\_\_\_ 7. Other Phone: \_\_\_\_\_

8. Description of Suspect:  
\_\_\_\_\_  
(Race) Sex (Male/ Female) Hair Color Approximate Age

\_\_\_\_\_  
Clothing Description (Include as much detail as possible, i.e., color, wearing hat, writings/ designs on clothing)

\_\_\_\_\_  
Other Distinguishing Features (i.e., visible scars, tattoos, birthmarks, acne, glasses, braces, etc.)

\_\_\_\_\_  
Suspect Vehicle Information (If known, i.e., color, make, model, year, license plate number and state)

9. Can you identify the suspect? Yes / No (Circle one)

10. Will you aid in prosecution? Yes / No (Circle one)

11. Did the suspect present the check to you? Yes / No (Circle one)  
(If yes, complete the following questions numbered 12 - 16)  
(If no, proceed to question number 17)

12. Date and time the check was presented? \_\_\_\_/\_\_\_\_/\_\_\_\_ \_\_\_\_ a.m./ p.m.  
Month Day Year Time

13. What identification was presented by the suspect? \_\_\_\_\_  
(Please include identification number: e.g., Colorado DL #12-345-6789, Colorado ID #12-345-6789, etc.)

14. Was the identification number recorded on the check? Yes / No (Circle one)

15. If a photo ID was used, was the picture compared to the suspect? Yes / No (Circle one)

16. Did the suspect endorse (sign) the check in your presence? Yes / No (Circle one)

17. Please write a statement describing the incident in as much detail as possible. Also include any information you possess which will assist in locating the suspect: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Please attach the following items to this page prior to returning it to the Police Department:**

- Completed Witness Form(s) by person(s) who accepted the check(s)
- Original or Bank-generated Substitute Check(s)
- “green” USPS Domestic Return Receipt from your Certified Mail Notice. (If notice was unclaimed, attach that to indicate it was undeliverable.)
- A copy of your “demand” letter that was mailed to the check-writer.
- Itemized list of goods or services and/or copies of any receipts.
- Any other items you feel are pertinent to this case.

## Sample Demand Letter

Victims of dishonored checks are required to make at least one attempt to notify a check writer to demand payment of a dishonored check that is returned because of Insufficient Funds, etc. This must be done by certified mail. The check writer must then be given ten (10) days to respond. (If, after that time, the matter has not been resolved, the check can be referred to the Glenwood Springs Police Department provided it meets the requirements set forth as outlined at the front of this packet.)

This sample demand letter below is suitable to send to the check writer.

Be sure to date the letter.

You can vary the text, but the text of a demand letter should substantially conform to this wording.

You may require your usual, posted fee amount.

Keep a copy of the letter for your files.

If it is returned as undeliverable, you should enclose the undelivered letter when you submit the check to the Police Department.

(Company Letterhead)

Date

Check writer name  
Address  
City, State ZIP Code

Re: Notice of Dishonored Check

You are hereby notified that a check, number \_\_\_\_\_, issued by you on (*date of check*), drawn upon (*name of bank*), and payable to (*your business*), has been dishonored.

You have ten (10) days from the date of this notice to tender payment of the full amount of the check, plus a fee of \$\_\_\_\_\_ to the undersigned at: \_\_\_\_\_.

You are further notified that in the event the above amount is timely paid in full, you will not be subject to legal proceedings, Civil or Criminal.

Sincerely,

(Signed)

## **CIVIL LAWSUIT INFORMATION**

The following civil lawsuit information is being provided for informational purposes only and does not constitute legal advice about your case. Contact the Garfield County Court Clerk's Office with any questions or if further information is needed. Additional information is also available online at [www.courts.state.co.us](http://www.courts.state.co.us). Click on Self Help Center (on left of screen), then Forms/ Self Help.

- For your convenience, a case can be filed in either court location by contacting the Garfield County Court Clerk's Office:
  1. Garfield County Court– Ninth Judicial District  
109 8th St, Suite 104  
Glenwood Springs, CO 81601  
(970) 945-5075
  2. Garfield County Associate Court - Ninth Judicial District  
110 E 18th St  
Rifle, CO 81650  
(970) 625-5100

### **Small Claims Court Cases:**

- To file a Small Claims Case in Garfield County, the following must be met:
  1. Both Plaintiff and Defendant reside in Garfield County,
  2. Total claim amount must not exceed \$7,500.00.
- Instructions for filing a Small Claims Case are available online at:  
<http://www.courts.state.co.us/chs/court/forms/smallclaims/smallclaims.html>

### **County Court Civil Cases (Money Demand):**

- To file a County Court Civil Case in Garfield County, either of the following must apply:
  1. Either Plaintiff or Defendant must reside in Garfield County,
  2. The claim amount exceeds \$7,500.00, but the claim amount cannot exceed \$15,000.00.
- Instructions for filing a County Court Civil Case are available online at:  
<http://www.courts.state.co.us/chs/court/forms/countycivilforms/countycivil.htm>

**\*Contact the District Attorney's Office, 9th Judicial District, at (970) 945-8635 or in person at 109 8th St, Suite 308, Glenwood Springs, CO 81601, for further direction in the event your case does not fit either scenario outlined above.**

# GSPD Check Fraud Brochure Available:



## Check Fraud Brochure for Businesses:

- *Useful information and tips to preventing Check Fraud.*
- *Removable 5-step guide to accepting checks that can be placed near your cash register as a helpful reminder.*
- *Brochure is available by calling GSPD at (970) 384-6500 or fill in the information below and fax to GSPD at (970) 928-0162 to have one mailed to you. You can also go to [www.glenwoodpolice.com](http://www.glenwoodpolice.com) and click on Brochures and Packets to download and print.*

BUSINESS NAME: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP: \_\_\_\_\_

BUSINESS PHONE: \_\_\_\_\_

BUSINESS FAX: \_\_\_\_\_

YOUR NAME: \_\_\_\_\_

ARE YOU? MANAGER OWNER or OTHER: \_\_\_\_\_

***Please take a moment to provide GSPD with important key-holder/ contact information in the event of an emergency:***

NAME: \_\_\_\_\_ PHONE: \_\_\_\_\_

NAME: \_\_\_\_\_ PHONE: \_\_\_\_\_

NAME: \_\_\_\_\_ PHONE: \_\_\_\_\_

NAME: \_\_\_\_\_ PHONE: \_\_\_\_\_