



Police Department

Edward A. Flynn
Chief of Police

TO WHOM IT MAY CONCERN:

This packet contains the necessary forms and instructions for you to proceed with filing an Issue of Worthless Check (IOWC) complaint under State Statute 943.24. Only those checks received by you within the City of Milwaukee can be filed with the White Collar Crimes Unit (hereafter referred to as "the Unit"). You may reproduce the materials within this packet that are necessary for filing a complaint.

It is important that all of the forms filed by you are complete, accurate, and legible (typed or printed in black ink). It is equally important that you refer to the "Issue of Worthless Check Policy Exceptions" list, which instructs on matters pertaining to civil actions. If your situation includes any of the items listed on the Policy Exceptions list, you **CANNOT** file a complaint with the Milwaukee Police Department. This does not mean that you cannot attempt to recover your losses, but rather that you must proceed in Small Claims Court to do so (see bottom of Policy Exceptions list for Small Claims Court contact information).

The following is the step-by-step procedure you must follow in order to file a complaint with the Unit:

1. You must have the original check. (Handle as little as possible and place in a see thru sleeve/ envelope)
2. The check has to have been processed through the banking system **OR** you must have documentation from the issuing bank, on the bank's letterhead, stating the reason the check cannot be processed (i.e. Non-Sufficient Funds, Account Closed etc.)
3. The bank must indicate on the check the reason for being worthless (i.e. Non-Sufficient Funds, Account Closed etc.) **OR** you must have the documentation explained above in #2.
4. You must send a **five-day demand letter** (useable sample attached) and a copy of the check to the last known address of the check writer via **certified mail, return receipt requested**.
5. Once the five-day demand letter is delivered and you received the signed postal return receipt for the certified letter but still no payment has been received, or you receive the certified letter returned as undeliverable or unclaimed, you may then fill out an "Issue of Worthless Check Report" (Form PI-33)
6. If any of the questions 1 through 9 on the IOWC Report are answered "**NO**", or if any of the questions 10 through 15 are answered "**YES**", you **CANNOT** file a complaint with the Milwaukee Police Department- you must proceed in Small Claims Court as indicated above.
7. If #17 on the IOWC Report is answered "NO", the check is a forgery and you must obtain a sworn, notarized affidavit of forgery and file a Forgery complaint

8. You **MUST contact the Unit before coming in to the office!** An appointment is required in order to assure that someone will be available to accept and review your report. The White Collar Crimes Unit is located in Room 304 of the Police Administration Building, which is entered at 951 North James Lovell Street, and is in operation between 8:00 am and 4:00 pm. Appointment must be made by calling the Unit at (414) 935-7387.
9. If you have met all of the requirements of the IOWC report, you must appear in person at the Unit with the **original check, a copy of the five-day demand letter, the signed postal return receipt, or the returned five-day demand letter, and the IOCW Report** properly filled out.
10. If you file an IOWC complaint and you later receive a payment for the worthless check(s), you must notify the Unit **AT ONCE.** Be aware that entering into any agreement to accept payment for the worthless check(s) by way of a payment schedule causes your IOWC criminal complaint to become null and void. If payment is to be accepted from the writer of the worthless check, it is in your best interest to accept the full amount owed in cash, money order, or cashier's check. A receipt for payment should then be issued to the worthless check writer.
11. To file a complaint with this Unit, you must be able to make available any personnel who are needed for the prosecution of the offender. If the personnel needed for witnesses in your complaint refuse or fail to make themselves available for any required appearances, be advised that your complaint could be withdrawn and prosecution stopped.
12. A check for less than \$100.00 will not be accepted by the Unit unless
 - a. You have a complaint check of at least \$100.00 (as explained below), or
 - b. You have checks totaling more than \$1,000.00 which were issued within a fifteen-day period, or
 - c. The Unit has a previous complaint on file, which has not been adjudicated by the courts.

The "**complaint check**" of the IOWC Report must be **at least \$100.00** (unless your checks fall under letters **b** or **c** above), or **you will not be able to file an IOWC complaint.** If you have at least one check issued to you for \$100 or as the complaint check, you may include other checks of any amount issued by the same check writer, including those checks for less than \$100.00. Those additional checks must be recorded in the "ADDITIONAL CHECKS" section of the IOWC Report (page 2 of Form PI-33A).

MILWAUKEE POLICE DEPARTMENT

ISSUE OF WORTHLESS CHECK REPORT

Case #: _____

File #: _____

COMPLAINING WITNESS

Your Name: _____ / _____ Date of Birth: ____/____/____
LAST FIRST M.I. RACE / SEX

Home Address: _____ Home Phone: () _____
CITY, STATE ZIP

Business Name: _____ Employee Owner

Bus. Address: _____ Bus. Phone: () _____
CITY, STATE ZIP

The information given in this complaint is true and correct to the best of my knowledge and I intend to fully cooperate with the investigation and prosecution of this matter, if so requested.

Complainant's Signature: _____ Date: ____/____/____

Same as above
(If so, skip to next section)

WITNESS WHO PERSONALLY RECEIVED CHECK

Name: _____ / _____ Date of Birth: ____/____/____
LAST FIRST M.I. RACE / SEX

Home Address: _____ Home Phone: () _____
CITY, STATE ZIP

Employment Title: _____ Bus. Phone: () _____ Can Identify the Suspect? Yes No

COMPLAINT CHECK INFORMATION

If you have more than one check written by the same person, select the check with the best identification, largest amount, etc., and provide the following information with that check in mind. (Additional checks can be listed on the back of Form PI-33A.)

Name of Check Writer: _____ / _____ Date of Birth: ____/____/____
LAST FIRST M.I. RACE / SEX

Address Printed on Check: _____ Phone #: () _____
CITY, STATE ZIP

Account Name Printed on Check: _____ Date Written on Check: ____/____/____

Check #: _____ Check Amt. \$: _____ Bank / S & L Check is Drawn on: _____

Address Where Check was Presented: _____ **MILWAUKEE**
CITY ZIP CODE

FOR OFFICE USE ONLY

State Statute 943.24 Misd. Fel. Wants: _____ SS #: _____ B of I #: _____

OIL OIL Date: _____ Response: _____ Disposition: _____

Read-In Summons Warrant #: _____ ADA: _____

Charging Check #: _____ Date of Check: _____ Check Amount: \$ _____ Total Checks: \$ _____

Reporting Officer: _____ Date Report Received: _____

Please answer the following questions referring to the **complaint check**, which you described in the **complaint check information** section on the *previous* page.

CIRCLE

- YES NO 1. Was the check written **less than** one year ago?
- YES NO 2. Was the check issued/received in the City of Milwaukee? ADDRESS WHERE CHECK WAS RECEIVED: _____
STREET ADDRESS ZIP CODE
- YES NO 3. Is the check drawn on a financial institution within the State of Wisconsin? INSTITUTION NAME: _____
- YES NO 4. Was the check **written** and **presented in person**? **Signed** in person, also.
- YES NO 5. Was identification from the check writer viewed and ID number/info written on the check? What type of ID was inspected? _____ **Photo** was compared. The number/info from the ID card was written on the front back of the check.
- OR-**
- Was the check writer a: regular customer known acquaintance?
If so, for approximately how long? _____
- YES NO 6. Was something given to the check writer at the *same time* he/she presented the check? What? CASH MERCHANDISE SERVICES (Check all that apply)
- YES NO 7. Is the person who accepted the check available and willing to testify in court? If not, is a company representative available?
- YES NO 8. Was the check stamped by the bank NSF ACCOUNT CLOSED indicating non-payment, *or* is there proof on the issuing bank's letterhead that the check is worthless?
- YES NO 9. Did you send the check writer a letter by **certified mail - return receipt requested** demanding restitution within five days?
- YES NO 10. Did the check writer ask that the check be held for any length of time? How long? _____
- YES NO 11. Was the check dated after the date of sale/transaction (post-dated)?
- YES NO 12. Has the check been referred to a collection agency, lawyer, small claims court, other police department, or bankruptcy court in addition to this office for collection, or has a lien been placed against any property? If so, explain... _____
- YES NO 13. Have you received any restitution, in part or in full?
- YES NO 14. Was the check for payment on a past-due or credit account?
- YES NO 15. Was the check issued for payment of a contractual agreement?
- YES NO 16. Is the name signed on the check imprinted anywhere on the check?
Name imprinted at top of check: _____
Name **signed** on check: _____
- YES NO 17. If the check presented is on a business account, is the signature on the maker line (lower right front) an authorized signer? Explain: _____
- YES NO 18. Did the check writer appear intoxicated or otherwise impaired? If so, describe: _____

ADDITIONAL CHECKS

DATE OF CHECK	CHECK NUMBER	AMOUNT	CHECK ISSUED FOR: (circle all that apply)	S A M E	STORE NAME AND ADDRESS WHERE CHECK PRESENTED	ACCEPTED BY: NAME, SEX/RACE, BIRTH DATE, ADDRESS, PHONE	CAN I.D. SUSPECT? (circle one)	BANK REJECTION REASON (circle one)
			cash / merch. / service				YES / NO	ACCT. CLOSED / NSF / OTHER
			cash / merch. / service				YES / NO	ACCT. CLOSED / NSF / OTHER
			cash / merch. / service				YES / NO	ACCT. CLOSED / NSF / OTHER
			cash / merch. / service				YES / NO	ACCT. CLOSED / NSF / OTHER
			cash / merch. / service				YES / NO	ACCT. CLOSED / NSF / OTHER
			cash / merch. / service				YES / NO	ACCT. CLOSED / NSF / OTHER
			cash / merch. / service				YES / NO	ACCT. CLOSED / NSF / OTHER
			cash / merch. / service				YES / NO	ACCT. CLOSED / NSF / OTHER
			cash / merch. / service				YES / NO	ACCT. CLOSED / NSF / OTHER
			cash / merch. / service				YES / NO	ACCT. CLOSED / NSF / OTHER
			cash / merch. / service				YES / NO	ACCT. CLOSED / NSF / OTHER

\$ _____ Sub-total of checks on this page. \$ _____ Additional fees / service charges

\$ _____ Amount of complaint check (at top of page 2 of IOWC Report) DISPOSITION _____

\$ _____ TOTAL RESTITUTION (Do *not* include additional fees/charges) _____

Date _____

Dear _____,

On _____, you issued a check to me / us in the amount of
(DATE)

\$ _____, drawn on _____,
(CHECK AMOUNT) (BANK NAME)

which was not honored by the bank. The check has been returned by the bank because of

(INDICATE "N.S.F." OR "ACCT. CLOSED")

Upon instruction from the Worthless Check Unit of the Milwaukee Police Department relating to State Statute 943.24, you are given an opportunity to make good on this check within five (5) days from receipt of notice of its dishonor. If restitution is not made or no satisfactory explanation is given as to why this check was dishonored, I will request prosecution through the Milwaukee Police Department. Please make arrangements to pay restitution by contacting the undersigned immediately.

Sincerely,

(SIGNATURE)

(PRINT NAME)

(BUSINESS NAME)

(ADDRESS)

(CITY, STATE, ZIP CODE)

(TELEPHONE NUMBER)

I can be contacted at: