



Nicholas "Nico" LaHood District Attorney

BEXAR COUNTY DISTRICT ATTORNEY'S OFFICE WORTHLESS CHECK INFORMATION FORM Please PRINT LEGIBLY or TYPE in Duplicate – FILL IN COMPLETELY

YOU MUST PROVIDE IDENTIFICATION OF CHECK WRITER

Date: _____

NAME OF PERSON SIGNING CHECK _____

Current Home Address _____ Zip _____ Phone _____

Current Work or Business _____ Zip _____ Phone _____

Is this a Company Check? Yes No Check writer's relationship to Co. _____

NAME OF PERSON ACCEPTING CHECK _____

Address _____ Zip _____ Phone _____

Can he/she identify check writer? Yes No Did signer of check deliver in person? Yes No If no, who? _____

How many checks are being filed? _____ Check No(s) _____

Date(s) _____ Amount(s) _____

Bank _____ Payable to _____

Was check presented or deposited to a financial institution within 30 days? Yes No Was check post dated? Yes No

Was check a hold check? Yes No

Reason financial institution returned or did not accept check: NSF ACCOUNT CLOSED OTHER (Specify) _____

DESCRIBE IN CONCISE DETAIL PROPERTY OR SERVICE GIVEN FOR CHECK(S): (Attach any supporting documentation) _____

Where was property or service rendered? _____

Is this location in Bexar County? Yes No Was property delivered or service rendered at time check was received? Yes No

If no, when _____

Money collected should be sent to _____

Address _____ City _____ Zip _____ Phone _____

Should we require more information, contact _____ Phone _____

RESTITUTION:

Has check writer made any restitutions or signed a promissory note? Yes No If so, what amount? _____ When _____

Explain _____

I understand that my check may be accepted for collection purposes only, although the District Attorney cannot assure restitution, nor can the District Attorney guarantee that this complaint will be accepted for prosecution. I understand that I may redeem my check in 60 days if it is accepted for collection purposes only. If a decision is made to prosecute the check writer, this check will become part of the evidence file for the State of Texas. **Please allow 60 days before a written inquiry is made concerning the case.** We will attempt to answer all inquiries but ask that requests be kept to a minimum because of the volume of complaints received. I hereby swear that the above information is true, correct and complete to the best of my knowledge. I understand that if charges are filed a warrant will be issued to have the check writer placed in jail. If necessary, the above names witness(es) will be required to appear against the check writer in a Criminal Court of Law.

Signature of Complainant (Agent)

Texas Drivers License No. of Complainant (Agent)

D.A. CHECK SECTION
CADENA-REEVES JUSTICE CENTER
300 DOLOROSA ST. SUITE 5175
SAN ANTONIO, TEXAS 78205-3031

DA Use Only: