

ITASCA COUNTY SHERIFF'S OFFICE
VICTOR J. WILLIAMS, SHERIFF



440 1st Avenue NE • Grand Rapids, MN 55744 • 218-326-3477 • FAX: 218-326-4663

TO WHOM IT MAY CONCERN:

This packet has been provided to assist you in the collection of "NSF", "Account Closed", and "Stopped Payment" checks passed in Itasca County. Please follow these steps before you turn the check(s) over to the Itasca County Sheriff's Office for collection:

1. Complete and Send a Notice and Demand for Payment of Dishonored Check for each check along with a copy of the returned check(s)
 - a. The law requires that you send this notice by certified mail, return receipt requested, or by regular mail, to the address printed on the check, and supported by an Affidavit of Mailing.
 - b. Give at least five (5) business days for response to notice.
2. If you do not get a response within 30 days you may then turn the check(s) over to the Sheriff's Office with the following items:
 - a. Original check (or legal copy from bank)
 - b. Copy of Notice and Demand for Payment of Dishonored Check(s) for each check.
 - c. Copy of Worthless Check Report form. You only need to fill out one form regardless of the number of checks. (**NOTE:** *The County Attorney's Office will not prosecute dishonored checks unless the "Worthless Check Report" form is filled out as completely as possible.*)

Once the Sheriff's Office has received all of the above information, we will send a letter giving the individual(s) ten (10) days to respond to the demand for payment. If no response, the matter will be turned over to the appropriate city/county attorney.

In the event the Sheriff's Office is able to collect the dishonored check, only the amount of the check will be collected for the business and/or individual. No fees will be collected for the business and/or individual.

Please understand that once checks have been turned over to the Sheriff's Office, the Sheriff's Office, not the business or payee, should collect the dishonored check(s). This process enables the Sheriff's Office to maintain consistency in collecting on the high volume of dishonored checks written in Itasca County. In the event you do happen to receive payment after you have turned everything over to the Sheriff's Office, please notify the Sheriff's Office immediately so we don't proceed with prosecution.

If you have any questions regarding this process or need assistance in filling out these forms, please feel free to contact Carol @ 218.327.7477.

It is important to keep copies of all documents you mail for your records.

WORTHLESS CHECK REPORT

Date: _____

Reported By: _____ Phone: _____

Business Name: _____ Phone: _____

Business Address: _____ City: _____

_____ State, Zip: _____

Person who received check: _____ Phone: _____

Address (if different from business): _____ City: _____

_____ State, Zip: _____

Can person who received check identify person who passed check? _____

Was authorization requested? _____ If yes, who authorized? _____

Person who passed check: _____ Phone: _____

Address: _____ City: _____

Drivers License #: _____ State, Zip: _____

Other identifying information: _____

Was anything said when the check was cashed? _____ If yes, give details: _____

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Check Number: _____ Date of Check: _____ Check Amount: _____

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What was the check for? _____ (i.e. purchase, payment on account)

Was the check postdated? _____ If yes, date check was received: _____

Was there an agreement to hold before cashing it? _____ If yes, for how long? _____

Was demand for payment made? _____

- By phone
- By regular mail supported by an Affidavit of Mailing
- By Certified Mail with Return Receipt Request
- Other: _____

Was a copy of Minnesota Statutes 609.535, subd 2a, included in the demand for payment? _____

Was any partial payment made? _____ If yes, amount of payment: _____

NOTICE AND DEMAND FOR PAYMENT OF DISHONORED CHECK(S)

_____, you are hereby notified, pursuant to Minnesota State Statute §609.535, Subd. 3, that check number _____ dated _____, 20____, drawn on the _____ Bank of _____ (city and state), in the amount of \$_____, bearing the signature of _____, and payable to the order of _____, has been returned unpaid with the notation that payment has been refused because of _____.

Unless this check is paid in full within five (5) business days after mailing of this notice, the payee or holder of the check will refer the matter to proper authorities for prosecution, and the drawee (the bank) may release information relating to the account to the payee or holder of the check.

REMIT PAYMENT IN THE FORM OF A MONEY ORDER OR CASHIERS CHECK IN THE AMOUNT OF \$ _____

Dated: _____ Remit to: _____
Business/Individual Name and Address
Address: _____

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609.535 ISSUANCE OF DISHONORED CHECKS.

Subd. 2a.Penalties. (a) A person who is convicted of issuing a dishonored check under subdivision 2 may be sentenced as follows:

(1) to imprisonment for not more than five years or to payment of a fine of not more than \$10,000, or both, if the value of the dishonored check, or checks aggregated under paragraph (b), is more than \$500;

(2) to imprisonment for not more than one year or to payment of a fine of not more than \$3,000, or both, if the value of the dishonored check, or checks aggregated under paragraph (b), is more than \$250 but not more than \$500; or

(3) to imprisonment for not more than 90 days or to payment of a fine of not more than \$1,000, or both, if the value of the dishonored check, or checks aggregated under paragraph (b), is not more than \$250.

(b) In a prosecution under this subdivision, the value of dishonored checks issued by the defendant in violation of this subdivision within any six-month period may be aggregated and the defendant charged accordingly in applying this section. When two or more offenses are committed by the same person in two or more counties, the accused may be prosecuted in any county in which one of the dishonored checks was issued for all of the offenses aggregated under this paragraph.

NOTICE AND DEMAND FOR PAYMENT OF DISHONORED CHECK(S)

Mary Jane Smith, You are hereby notified, pursuant to Minnesota State Statute §609.535, Subd. 3, that check number 1575 dated June 1, 2017, drawn on the State Bank of Grand Rapids MN (city and state), in the amount of \$ 55.00, bearing the signature of Mary Jane Smith, and payable to the order of 123 Business, has been returned unpaid with the notation that payment has been refused because of NSF.

Unless this check is paid in full within five (5) business days after mailing of this notice, the payee or holder of the check will refer the matter to proper authorities for prosecution, and the drawee (the bank) may release information relating to the account to the payee or holder of the check.

REMIT PAYMENT IN THE FORM OF A MONEY ORDER OR CASHIERS CHECK IN THE AMOUNT OF \$ 85.00

Dated: June 23, 2017
Remit to: 123 Business
Business/Individual Name and Address
Address: 123 NE 2nd Avenue
Grand Rapids MN 55744

609.535 ISSUANCE OF DISHONORED CHECKS.

Subd. 2a. **Penalties.** (a) A person who is convicted of issuing a dishonored check under subdivision 2 may be sentenced as follows:

- (1) to imprisonment for not more than five years or to payment of a fine of not more than \$10,000, or both, if the value of the dishonored check, or checks aggregated under paragraph (b), is more than \$500;
 - (2) to imprisonment for not more than one year or to payment of a fine of not more than \$3,000, or both, if the value of the dishonored check, or checks aggregated under paragraph (b), is more than \$250 but not more than \$300, or
 - (3) to imprisonment for not more than 90 days or to payment of a fine of not more than \$1,000, or both, if the value of the dishonored check, or checks aggregated under paragraph (b), is not more than \$250.
- (b) In a prosecution under this subdivision, the value of dishonored checks issued by the defendant in violation of this subdivision within any six-month period may be aggregated and the defendant charged accordingly in applying this section. When two or more offenses are committed by the same person in two or more counties, the accused may be prosecuted in any county in which one of the dishonored checks was issued for all of the offenses aggregated under this paragraph.

Attach COPY of RETURNED CHECK to this notice prior to mailing

AFFIDAVIT OF MAILING

STATE OF MINNESOTA)
COUNTY OF ITASCA) ss

Being first duly sworn, I state that on June 23, 2017 I served the annexed Notice and Demand for Payment of Dishonored Check(s) on the named person at the address printed on the check or the last known address:

Name: Mary Jane Smith
Address: 123 NE 2nd Avenue
Grand Rapids
MN 55744

by depositing same in the U.S. Mail at Grand Rapids, Minnesota.

Mary Jane Smith Signature
06/23/17 Date

Subscribed and sworn to before me on June 30, 2017.
Month Day

Mary Jane Smith
Notary Public (NOTARY PUBLIC SEAL)

Retain this document for your records