



## POLICE DEPARTMENT CITY OF OAK PARK HEIGHTS

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14168 Oak Park Blvd. N. • P.O. Box 2007  
Oak Park Heights, Minnesota 55082  
Telephone: (651) 439-4723  
Fax: (651) 439-3639  
Emergency: 911

Brian DeRosier  
Chief of Police

The following steps are necessary to process worthless checks through the Oak Park Heights Police Department:

1. Complete attached "Notice and Demand for Dishonored Check" to the person who wrote the check and mail to that person, to the address listed on the check. Maintain a copy of this for your records.
2. At the time of mailing, complete the attached "Affidavit of Service by Mailing" or send certified mail.
3. After five (5) business days have elapsed from the time of mailing, complete the attached "Worthless Check Report". (This is to be done if you have not received reimbursement in the five day period.)
4. If reimbursement is not received, send the following to the Oak Park Heights Police Department:
  - a. Worthless Check Information Worksheet
  - b. Copy of Notice and Demand for Payment
  - c. Affidavit of Service by Mailing or Certified Mail Receipt
  - d. The original check
  - e. Employee validation
5. All items listed in number 4 must be received by this police department within sixty (60) days of the date listed on the check. After receiving ALL items listed in number 4 the check will be processed.
6. No prosecution under \$50.00.

**NOTICE AND DEMAND FOR PAYMENT OF DISHONORED CHECK**

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

Name on check: \_\_\_\_\_

Address on check: \_\_\_\_\_

City: \_\_\_\_\_

You are hereby notified that a check dated \_\_\_\_\_, 20\_\_

Drawn on the \_\_\_\_\_ bank,

of \_\_\_\_\_ in the amount of \$ \_\_\_\_\_

bearing the signature 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 this notice, we will or may refer the matter to proper authorities for prosecution under Minnesota State Statute 609.535, and the financial institution shall release information relating to this checking account to the payee or holder of the check.

Remit to \_\_\_\_\_

Address \_\_\_\_\_

City, State, Zip \_\_\_\_\_

Check total: \_\_\_\_\_

Service Fee: \_\_\_\_\_

Total Amount Due: \_\_\_\_\_

**AFFIDAVIT OF SERVICE BY MAILING**

STATE OF MINNESOTA )  
 )  
COUNTY OF \_\_\_\_\_ )

ss.

\_\_\_\_\_, being first duly sworn, deposes and says:

That \_\_\_he is a citizen of the United States of America and over the age of 18 years; that on the \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_, this affiant deposited in the mailing department of the United States Post Office at \_\_\_\_\_, Minnesota, a sealed envelope with postage thereon duly prepaid, containing a true and correct copy of the attached "Notice and Demand for Payment of Dishonored Check."

That envelope was addressed to the following person at the address printed on the check as follows:

(address on check)

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

\_\_\_\_\_  
Signature of person mailing notice

Subscribed and sworn to before me this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_.

\_\_\_\_\_  
Signature of Notary Public

Worthless Check  
Information Worksheet

**Oak Park Heights  
Police Department  
651-439-4723**

Case # \_\_\_\_\_

1. If you have received a FORGED CHECK or a NO ACCOUNT CHECK, call us immediately.
2. If you have received an ACCOUNT CLOSED CHECK or an NSF CHECK, answer the following questions before calling us:

Circle One

- |   |     |    |
|---|-----|----|
| a. Was a Driver's License or State I.D. card used to verify identity of the passer? | Yes | No |
| b. Did the picture on the Driver's License or I.D. card match the check passer?     | Yes | No |
| c. Did the description on the Driver's License or I.D. card match the check passer? | Yes | No |
| d. Does the Driver's License or I.D. card number appear on the check?               | Yes | No |
| e. Do the initials of the person accepting the check appear on the check?           | Yes | No |
| f. Has at least five working days passed since you sent the demand for payment?     | Yes | No |
| g. If the check is NSP, have you presented it to the bank twice for payment?        | Yes | No |
| h. Is the check passer's name on the check?   | Yes | No |
| i. Is there a home or work address printed on the check?                            | Yes | No |
| j. Is there a home or work phone number on the check?                               | Yes | No |
| k. Were merchandise or services delivered when check was written?                   | Yes | No |
| l. Was the check dated the same as the date on which the check was received?        | Yes | No |

**(We cannot prosecute past consideration, pre or post dated checks)**

**If the answer to any of these questions is "No" - we cannot accept the case. We suggest that you try civil remedies such as Conciliation Court or a collection agency.**

**If all answers are "Yes" - complete the following information before calling the Police:**

**Victim Information**

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Business Name \_\_\_\_\_

Manager Name \_\_\_\_\_ Business Phone \_\_\_\_\_

Address \_\_\_\_\_

Reporting Person \_\_\_\_\_ Business Phone \_\_\_\_\_

Address \_\_\_\_\_

Person Who Accepted Check \_\_\_\_\_ Home Phone \_\_\_\_\_

Address \_\_\_\_\_

**Subject/Check Information**

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Check Passer Name \_\_\_\_\_ Date of Birth \_\_\_\_\_

Address \_\_\_\_\_

Minnesota D.L. or I.D. card # \_\_\_\_\_

Home Phone \_\_\_\_\_ Business Phone \_\_\_\_\_

Vehicle Used (make, model, age, license plate & color) \_\_\_\_\_

Description/Other Information on Subject \_\_\_\_\_

Reason for Check's Return (circle one) NSF    Account Closed    No Account    Forgery    Other \_\_\_\_\_

Bank Drawn On \_\_\_\_\_ Bank Address \_\_\_\_\_

Type of check (circle one)      Personal      Business      Other

Payable To \_\_\_\_\_ Signature on Check (circle one)      Yes      No

Type of Services/Merchandise Involved \_\_\_\_\_

Value of Services/Merchandise Involved \_\_\_\_\_

Was cash returned to check passer? \_\_\_\_\_

**Check Identification**

| Date | Account Number | Check Number | Amount |
|------|----------------|--------------|--------|
|      |                |              |        |
|      |                |              |        |
|      |                |              |        |
|      |                |              |        |

List additional checks accepted on a separate sheet.

**This form is designed to assist you. Falsification of any information will result in your Police Department's inability to take reports from you in the future.**

I/We hereby certify that the information contained in this Worthless Check Information Worksheet is true and correct to the best of my/our knowledge.

\_\_\_\_\_  
Signature of Person Accepting the Check

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature of Person Reporting to Police

\_\_\_\_\_  
Date

**Handle the Check as Little as Possible**

## Oak Park Heights Police Dept. Worthless Check Investigation

I am an Employee of \_\_\_\_\_ at the address of  
\_\_\_\_\_ Oak Park Heights, MN 55082.

Check #'s \_\_\_\_\_

Issue Date and Amount: \_\_\_\_\_

Name of Account Holder/Person Issuing Check: \_\_\_\_\_

I have reviewed the Check or Checks that have been returned unpaid. I acknowledge that I was employed the day these checks were accepted and that I accepted them.

I feel that I, **WOULD** or **WOULD NOT**; be able to make an identification of the person from a photo line up of the suspect along with 5 other unknown people. (please circle applicable)

If I would not be able to make positive identification from a photo, I can testify to the following:

1. I looked at a drivers license with a photo on it that identified the person issuing the check.  
I would not have accepted the check if the drivers license photo did not match the person issuing the check.
2. I wrote the drivers license number from that license onto the check at the time I accepted the check.
3. I wrote the date of birth from the drivers license onto the check.

Printed full name of employee F,M,L and date of birth:

\_\_\_\_\_

Employee Signature/Date: \_\_\_\_\_