

**DOOR COUNTY DISTRICT ATTORNEY
WORTHLESS CHECK INFORMATION SHEET**

NOTE: PLEASE NOTIFY US IMMEDIATELY OF ANY PAYMENTS RECEIVED AFTER YOU'VE TURNED THE CHECK OVER TO OUR OFFICE.

Person Passing Check

Name _____ Date of Birth _____
Address _____
Phone Number _____ Driver's License # _____

Incident

Date check passed _____ Amount \$ _____ Bank Charge
Check Number _____ Dated _____ Incurred \$ _____
Bank _____ Account # _____
Reason Returned (circle one) Acct Closed NSF Stop Payment Other
Check issued for: Cash Amount \$ _____ Goods Amount \$ _____
Is passer previously known by person accepting check? (circle one) Yes No

Your Business Information

Name _____ Phone Number _____
Street Address _____
Mailing Address (if different) _____

Person Accepting Check

Name _____ Date of Birth _____
Home Address _____
Home Telephone _____ Job Title _____
Witnessed Writing of Check? (circle one) Yes No
Checked Photo ID? (circle one) Yes No
Initialed Corner of Check? (circle one) Yes No

Person Completing This Form

Name _____ Date of Birth _____
Home Address _____
Home Telephone _____ Job Title _____

Collection Efforts by Business

Date Written Notice Sent _____ (copy of written notice must be provided)
Describe other efforts made (if applicable)

Please Attach :

Original Check
Bank Notice (If Any)
Copy of Written Notice

Please mail or deliver this information to:

Door District Attorney's Office
Attn: Holly
1215 S. Duluth Avenue
Sturgeon Bay WI 54235