

Directions to Merchant:

- 1: FILL THIS FORM OUT COMPLETELY AS SOON AS A CHECK IS RETURNED FROM THE BANK.
- 2: MAIL THIS FORM TO THE BECK CHECK WRITER BY FIRST CLASS MAIL AS SOON AS IT IS FILLED OUT.
- 3: IF YOU DO NOT RECEIVE PAYMENT OR A RESPONSE FROM THE CHECK WRITER. FILL OUT A COMPLAINT SHEET PROVIDED BY THE ECONOMIC CRIMES UNIT ACCORDING TO THE DIRECTIONS ON THE COMPLAINT SHEET.
- 4: KEEP YOUR ORIGINAL COPY OF THE CHECK.



Economic Crimes Unit  
Jackson County Prosecutor's Office

## Notice Letter

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

(Name of Check Issuer/Passer)

\_\_\_\_\_  
Street Address

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

The Check Described below has been DISHONORED:

Instrument/Check Number: \_\_\_\_\_ Instrument/Check Date: \_\_\_\_\_

Originating Institution, Bank or Other Drawee: \_\_\_\_\_

Amount: \_\_\_\_\_

Payable To: \_\_\_\_\_

Reason for Dishonor \_\_\_\_\_

**PERSUANT TO MICHIGAN COMPILED LAWS 750.132:** Unless this amount is paid in full within **FIVE DAYS** from receipt of this notice the holder may assume you delivered the instrument **with the intent to defraud** and may turn over the dishonored instrument and all other available information relating to this incident to the police and prosecutor for prosecution.

Check Amount: \_\_\_\_\_

Victim Name (printed): \_\_\_\_\_

Fee Amount: \_\_\_\_\_

Address: \_\_\_\_\_

Total Owed: \_\_\_\_\_

Victim Signature: \_\_\_\_\_

Telephone Number: \_\_\_\_\_