

REQUEST FOR PROSECUTION

I understand that submitting a request for prosecution does not guarantee that the County Attorney's Office will accept my case for prosecution. I understand that if charges are filed, a warrant will be issued for the accused who may be placed in jail. I will not accept any payments once the check(s) has been turned over to the County Attorney's Office. I understand that all checks become a part of the official records of the County Attorney's Office and will not be returned to either the payee or the checkwriter.

Merchant's Signature		
PLEASE FILL OUT ALL THE REQUESTE	D INFORMATION BELOW.	
Person who accepted check from checkwri	iter:	
NAME:		
HOME ADDRESS:	CITY:	STATE:
CELL NUMBER:	EMAIL:	
CAN THE PERSON WHO ACCEPTED TH IF NO, PLEASE FILL OUT SECTION BELOW	E CHECK IDENTIFY THE CHECKWR	RITER? YES NO
Person who can ID the checkwriter:		
NAME:		
HOME ADDRESS:		
CELL NUMBER:		

Merchant Intake Questionnaire

Please answer each question by circling "YES" or "NO" and provide additional details where requested.

1. Check Amount

- Is the check amount \$2,500.00 or more? YES NO
- If YES, did you file a **police report**? YES NO
 - o Police Report Number: _____

2. Identification Verification

 Does your company policy require comparing the DL/ID photo to the person presenting the check? YES NO

3. Check Details

- Is the check **postdated**? YES NO
- Is the check a **payment toward an existing balance**? YES NO
- Is the check a **payroll check**? YES NO
 - o If YES, was a **service fee subtracted** from the payroll check amount? YES NO
- Is the check a loan payment? YES NO
- Is the check a **refund**? YES NO

4. Partial Payment

- Has a partial payment been accepted for this check? YES NO
 - o If YES, Amount: \$_____

5. Banking Information

- Was the check presented to the bank for payment within 30 days of issuance? YES NO
- Was the check believed to be valid at the time it was accepted? YES NO

Required Documents Checklist

Please attach the following documents to the Request for Prosecution:

- Copy of the Check(s) Front and back, stamped "NSF" or "Account Closed."
- Copy of Dishonor Letter
 - o If sent by regular mail, include the **notarized Affidavit of Service**.
 - If sent by certified mail, provide the signed green return receipt.
 - o If returned undelivered, include the **sealed, returned certified letter**.
- **Police Report** Required for checks \$2,500.00 or greater; include the report number.
- **Supporting Documentation** Any relevant receipts, invoices, contracts (rental or service), identification, text messages, emails, or IDs.

The Hot Check Department at the El Paso County Attorney's Office is here to assist you. Please help us ensure the best outcome by completing this form thoroughly and accurately. Thank you!