

PLEASE PRINT OR TYPE IN TRIPLICATE – FILL IN COMPLETELY

STATE OF TEXAS)
COUNTY OF TARRANT)

TARRANT COUNTY DISTRICT ATTORNEY'S OFFICE
WORTHLESS CHECK INFORMATION AND AFFIDAVIT

FOR D.A. OFFICE USE ONLY			
D:	A:	NE:	LW:
CW#:			
Date Received: & Control #:			
IP#:			
Received By:			

The undersigned affiant, who after being duly sworn by me, makes the following statements under oath: I have good reason to believe and do

believe that _____,
(Name of person originally writing checks(s))

hereinafter called the accused, did commit the offense of theft by passing a worthless check. My belief is based on the following facts, as shown by the appropriately completed information as set out below, to-wit:

FACTS ABOUT THE ACCUSED

DL#: _____, State: _____, DOB: _____, SSN: _____

Description: Sex: _____, Race: _____, Height: _____, Weight: _____, Hair: _____, Eyes: _____

Home Address: _____, City: _____, State: _____, Zip: _____

Phone #: (_____) - _____, Business Address or Employer: _____

City: _____, State: _____, Zip: _____, Phone #: (_____) - _____

FACTS ABOUT THE CHECK(S)

Was check(s) presented to bank within 30 days of receipt? _____ Did accused deliver the check(s) in person? _____
If not, who did? _____

CHECK#	DATE WRITTEN	AMOUNT OF CHECK	PERSON WHO TOOK CHECK	CAN HE/SHE IDENTIFY CW IN COURT?	CHECK GIVEN FOR ATTACH SALES SLIP OR INVOICE	HOW CHECK DISHONORED

(Attach additional sheets if necessary with all of the above information on each check, same to be incorporated herein, under oath, for all purposes.)

TOTAL AMOUNT OF CHECK(S) \$ _____. Is it a regular policy of your business to require identification, (DL#, DOB, or SSN), by check writers in exchange for accepting their check? _____

OTHER PERTINENT FACTS

Restitution collected should be sent to: _____ Address: _____

City: _____ State: _____ Zip: _____ Phone #: (_____) - _____

Additional helpful information about this case: _____

I hereby swear or affirm that the above information is true and correct to the best of my knowledge; that the above check(s) was given in Tarrant County, Texas; that said check(s) was not post dated or a hold check(s); that said check(s) was believed to have been good when it was accepted; that no partial payment has been made on said check(s); that I personally received said check(s) or that by virtue of my employment I have the authority to make this affidavit on behalf of the holder; I understand that if charges are files a warrant will be issued for the accused who may be placed in jail.

Affiant (Complainant)
SUBSCRIBED AND SWORN to before me on this _____ day of _____, 200__.

NOTARY PUBLIC in and for the State of Texas

*NOTES: If accused pays direct to Complainant, D.A.'s office must be notified in writing.
Please notify this office if your address changes.