



CHIPPEWA COUNTY DISTRICT ATTORNEY'S OFFICE

WADE C. NEWELL, District Attorney

Chippewa County District Attorney's CHECK DIVERSION PROGRAM

**RESTITUTION GUIDE FOR MERCHANTS AND
RESIDENTS**



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Dear Chippewa County Merchants and Citizens:

Worthless checks diminish the profits of all businesses, and have even put some businesses out of business. As consumers and taxpayers, we all pay higher prices to make up for the losses associated with worthless checks. Chippewa County courts handle the second highest caseloads in the state, including a substantial number of worthless check prosecutions. The overwhelming worthless check caseload has burdened the District Attorney's resources and I am unsatisfied with delays in prosecution, delayed restitution payments and insufficient punishment for repeat offenders. No more.

Effective immediately, Chippewa County implements The Worthless Check Initiative as a more efficient way to handle worthless checks.

The goals of the program include:

- 1) Recover full restitution from individuals who write bad checks.
- 2) Recover restitution within a reasonable amount of time.
- 3) Educate defendants to prevent repeated worthless checks.
- 4) Educate merchants/citizens to identify and prevent worthless checks.
- 5) Reduce expenses incurred by the taxpayer by reducing law enforcement investigations and lessening an overburdened court workload.
- 6) Transfer the expense of worthless checks back onto those who write worthless checks.

The program comes at no cost to the taxpayer or area merchants. Writers of worthless checks will financially support the new program.

If you have further questions after reviewing this packet, please contact the Check Diversion Program at 651-267-0100.

Very truly yours,

Wade C. Newell
District Attorney

PROGRAM SUMMARY

- A. Check writer pays the Check Diversion Program - 100% of the face value of the check is returned to the merchant plus bank fees, if paid.
- B. Offender completes a financial counseling program offered by the Check Diversion Program.
- C. Check writer fails to pay – the check is sent for prosecution review and proceedings.

Checks eligible for the Program

- NSF, Account Closed, Refer to Maker, Debit card charge backs, ACH NSF's and Electronic Checks received within Chippewa County that do not exceed \$2500.00.
If your check exceeds \$2500.00 please report to law enforcement.
- Worthless checks LESS THAN 120 DAYS from the date issued by the check writer. (exception: first time program users can send checks up to 2 years old)

Checks not eligible for the Program

- **Promissory notes and/or arrangement to hold the check for deposit or credit extensions.**
- **Second party checks**
- **Stop Payment Checks**
- **Payroll Checks**
- **Checks that are going through or have gone through Small Claims Court**
- **Checks that are currently in collections by a collection agency or attorney (law firm)**
(checks can be forwarded to check diversion program after agency has sent them back)

STEPS TO FILING A COMPLAINT FORM

The two documents below must be completed before any checks can be processed in the program.

1. The “**Memorandum of Understanding**”. Send this with your first checks.
You need to send this in one time only.
2. A completed “**Preliminary Worthless Check Report**” form must accompany each check submitted to be considered for prosecution.
You must submit the original check(s) or a copy (if checks are imaged) stamped by the bank with the reason it was returned to you.

Mail checks to : **Chippewa County Check Diversion Program**
 PO Box 190
 Hager City, WI 54014-0190

DO NOT SUBMIT CHECKS TO THE DISTRICT ATTORNEY’S OFFICE

WORTHLESS CHECK PROGRAM REPORTING

For information on checks sent in call 651-267-0100

Restitution recovered will be handled as follows:

- Paid in full restitution will be deposited into a trust account and paid back monthly.
- Payment plans will be deposited into a trust account and paid back after final payment is received.

WHEN TO CONTACT LAW ENFORCEMENT

Contact your local law enforcement agency to report:

- Counterfeit check(s)
- Altered checks
- Forged checks of any amount
- Checking account opened using fraudulent information
- Stolen checks
- Returned checks greater than \$2500.00

When you are a victim of the above crimes, call your local Law Enforcement agency to file a report.

You must report these crimes *immediately* upon knowing.

SIGNAGE

The following signage is required by Wisconsin law to allow merchants to enforce collection of service charges and civil penalties. This must be posted where your customers can see the service charge at the time the check is accepted by the merchant. Copy as needed.

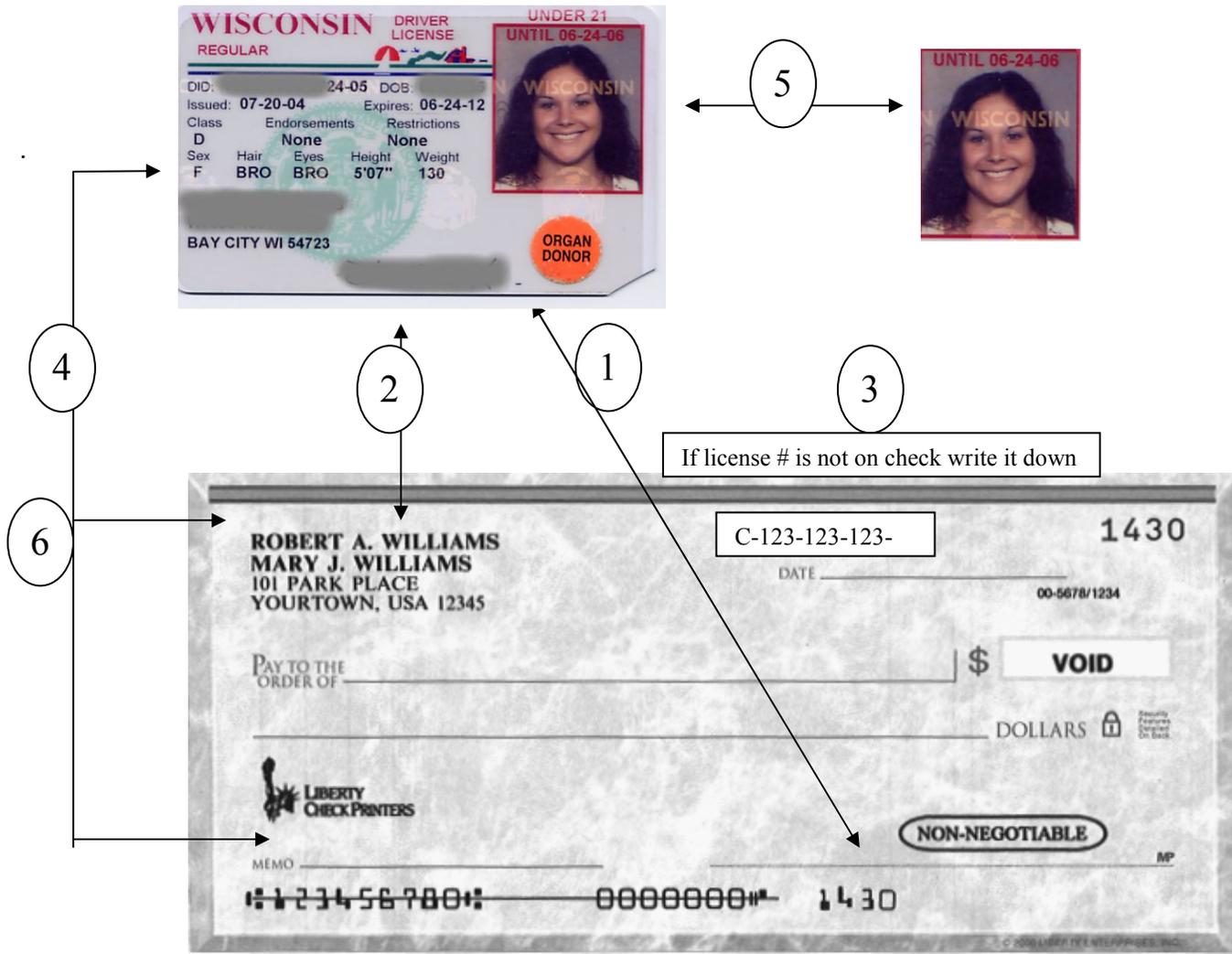
**IT'S AGAINST THE LAW TO WRITE A BAD
CHECK IN WISCONSIN**

**Checks returned to us for nonpayment
are subject to a service charge of**

\$30

**Additional civil penalty may be imposed
on checks returned for nonpayment after 30 days.**

CHECK ACCEPTANCE PROCEDURES



1. Check the signatures on the identification card and match this signature to the signature on the check (endorsement line). If these signatures do not match, acceptance should be declined
2. Make sure the identification card matches name and address on the check
If time permits write down good address as indicated by customer
3. Record or circle the Drivers License number or identification number
4. Record date of birth (i.e. DOB 1/29/72)
5. Make sure photo on identification card matches customer
6. Have employee initial upper left corner
7. Telephone number

PRELIMINARY WORTHLESS CHECK REPORT AND REQUEST FOR COMPLAINT

Mail to: Chippewa County Check Diversion Program
P.O. Box 190
Hager City, WI 54014-0190

MASTER FILE NUMBER (FCS Complete)	CASE NUMBER (FCS/Police Complete)	COURT FILE NUMBER (FCS/Police Complete)
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BELOW TO BE COMPLETED BY PERSON WHO ACCEPTED THE CHECK (Please fill out form as completely as you can)

VICTIM OR FIRM NAME	ADDRESS	BANK HANDLING FEE per CHECK
PERSON FILING COMPLAINT	CITY, STATE, ZIP CODE	BUSINESS PHONE ()
	E-MAIL ADDRESS	BUSINESS FAX ()

CAN ACCEPTOR ID CHECK WRITER THROUGH PHOTO LINE UP OR IN PERSON (CIRCLE ONE)

YES NO

(if yes is circled attach the single check with this form, if NO circled attach as many checks as you would like)

Check Acceptor information: PHONE # ADDRESS DOB Fill in the above information if you have circled YES above	ADDITIONAL WITNESS PHONE # ADDRESS DOB Fill in the above information if you have circled YES above
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DO YOU HAVE VIDEO OR RECORDING CUSTOMER AND IS IT AVAILABLE: YES ___ No ___	If yes please make still images and attach to form	
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PHONE CALLS/DATE: _____

COMMENTS

The check(s) in question is (are) submitted for criminal prosecution. By submitting this check(s) for prosecution, I agree NOT to accept restitution from the suspect or his/her agent. I certify that this report is true, accurate and complete to the best of my knowledge.

DATE: _____
Victim Signature and Title
Company