

**JUSTICE OF THE PEACE PRECINCT ONE
CHECKLIST - ISSUANCE OF BAD CHECK**

1. Bad Check was issued in Travis County Precinct One Jurisdiction.
2. Complainant has positive identification for defendant.
3. Check is stamped as Insufficient Funds (NSF), No Account, Account Closed, No Funds or Refer to Maker.
4. Original check is attached.
5. Date of bank stamp was after check date.
6. Check was presented for payment to bank within 30 days after issuance and the defendant failed to pay within 10 days after receiving notice of that refusal.
7. Notice was provided to defendant at address on check.
8. Green certified mail card or unopened envelope mailed certified is given to court as proof attempt was made to collect debt.
9. Complaint is filing on person who signed the check – this is for personal checking accounts.
10. Check amount is less than \$100.00.
11. Complaint and affidavit needs to be filed with Court.



Justice of the Peace Precinct One
Issuance of Bad Check – Information Sheet
Texas Penal Code Subchapter D – Sec. 32.41

BAD CHECK ISSUED BY

Name: _____ **Date of Birth:** _____ **Gender:** _____
Driver's License No.: _____ **State:** _____ **Race:** _____
Home Address: _____
Work Address: _____
Telephone Number: Cell: _____ **Work:** _____ **Home:** _____

COMPLAINANT

Name: _____
Address: _____
Name of Person Accepting Check: _____
Can the person who accepted the check identify the person who issued the check? Y _____ N _____
Did you or your employee (if applicable) look at the check writer's driver's license or ID and is that number recorded on the check? Y _____ N _____

CHECK INFORMATION

Amount of Check: \$ _____ **Date of Check:** _____ **Check Number:** _____
Date check accepted: _____ **Date Check presented at bank:** _____
Items/Services/Performance purchased with check? (Please be specific): _____

Location where check was issue/passed: _____
Reason check returned: **Insufficient Funds** **No Account** **Account Closed**
 No Funds **Refer to Maker**
Complainant's Signature: _____ **Date:** _____



IN THE NAME AND BY THE AUTHORITY OF STATE OF TEXAS

I, _____, being duly sworn to state on my oath that I have good reason to believe and do believe before the making and filing of this complaint that on or about the _____ day of _____,

_____, in the County of Travis and State of Texas,

_____, who resides at:

_____, Date of Birth: _____ did then and there issue or pass a check in the amount of \$ _____ on the Bank of: _____ in _____, Texas to _____ for the payment of money then and there knowing that:

the accused did not have sufficient funds in and on deposit with said bank for payment in full of the check at the time of issuance. The original check or bank imaged copy of the original check is attached as evident.

the accused did not have an existing open account with the bank at the time the accused issued or passed such check. The original check or bank copy of the original check is attached as evidence.

AGAINST THE PEACE AND DIGNITY OF THE STATE.

Complainant

SWORN TO and SUBSCRIBED before me by _____, a credible person, this the _____ day of _____, 20_____.

Court Clerk, Pct. 1
Travis County Justice of the Peace
or Notary Public