Seminole County Sheriff's Office
Sheriff Dennis Lemma
100 Eslinger Way
Sanford, FL 32773

Worthless Check Affidavit

Step 1
Confirm Eligibility

The following types of checks are ineligible for the program:

~ Two-party checks
~ Credit card checks
~ Checks passed outside of your county

~ Partially re-paid checks
~ Post/pre dated or altered checks
~ Checks which are repayment of a loan or civil contract agreement

~ Fraudulent or stamped lost/stolen/forged
~ Checks you agree to hold before depositing

Step 2
Victim Information

Victim/Merchant Name: _____

Contact Name: _____ Title: _____

Victim Contact Information: Email: _____

Phone: (_____) _____ Fax: (_____) _____

Address: _____ City: _____ State: _____ Zip: _____

Email, phone and fax are required for acknowledgement receipt of check and/or program communication

---

Step 3
Check Writer Information

Check Writer's Name: _____   Driver's License Number/Other ID #:

Address: _____   _____

City: _____ State: _____ Zip: _____   State: Date of Birth: Race:

Home Phone: (_____) _____ Other Phone: (_____) _____   _____ ____/____/____ _____

Written notice must be sent to recover the bad check(s) in question. If no attempt has been made, the check is not eligible for prosecution. (See courtesy notice on back.)

Step 4
Check Information

Check #	Date Passed	$ Amount	Name of Person Accepting Check *(if no longer employed, please list manager)*	What was Check for? *(Wages, Rent, Cash, Services)*	Can Person ID Check Writer?
_____	___/___/___	_____	_____	_____	☐ Yes ☐ No
_____	___/___/___	_____	_____	_____	☐ Yes ☐ No

Address where the check was accepted (if different than in Step 2): _____(Required)

City: _____ State: _____ Zip Code: _____

Step 5
Victim Verification

Sign & Date

☑ I understand that the check writer has the option to dispute this claim in writing with the Seminole County Sheriff's Office.

☑ If this affidavit is not completely filled out, it will prevent or delay this case from moving forward and/or for prosecution review.

☑ I attest that I have sent notice to the check writer and after 15 days it remains unpaid, unless check is returned Account Closed.

☑ I have reviewed the filing instructions and I hereby affirm and attest **under penalty of perjury**, that all information provided on this affidavit is true to the best of my knowledge.

_____ _____ _____
Signature of Person Filing (Required)   Print Name of Person Filing   Date Filed

---

Step 6
Affidavit of Mailing

I (name of person completing affidavit) _____ do hereby swear or affirm that I sent the statutorily required

notice to (name of check writer) _____ at (address mailed to) _____

_____ on (date letter mailed) _____, 20_____ by first class United States Mail.

Signature of Person Completing Affidavit: _____

Sworn to and subscribed before me this _____ day of _____, 20 _____

Signature of Notary Public or Law Enforcement: _____ Notary Seal:

For additional information or affidavits, go to www.SeminoleSheriff.org or call (407) 665-6850

Per Florida State Statute 832.07, Worthless Check Notification Letter

Date

Your Name
Your Company's Name
Address
City, State, Zip

Name of person who wrote the worthless check
Address of person who wrote the check (as it appears on the check)
City, State, Zip of person who wrote the check (as it appears on the check)

RE: Check Number _____

Dear (Name of person who wrote the worthless check) _____:

   You are hereby notified that check or electronic funds transfer, numbered _____, in the face amount of $_____, issued or initiated by you on _____/_____/_____, drawn upon _____ Bank, and payable to _____, has been dishonored. Pursuant to Florida Law, you have 15 days following the date of this notice to tender payment of the full amount of such check or electronic funds transfer, plus a service charge of $25, if the face value does not exceed $50; $30, if the face value exceeds $50 but does not exceed $300; $40, if the face value exceeds $300; or an amount of up to 5% of the face amount of the check, whichever is greater, the total amount due being $_____ and _____ cents. Unless this amount is paid in full within the time specified above, the holder of such check or electronic funds transfer may turn over the dishonored check or electronic funds transfer and all other available information relating to this incident to the State Attorney for criminal prosecution. You may be additionally liable in a civil action for triple the amount of the check or electronic funds transfer, but in no case less than $50, together with the amount of the check or electronic funds transfer, a service charge, court costs, reasonable attorney's fees, and incurred bank fees, as provided in s. 68.065, Florida Statutes.

Signature of person giving notice
Address of Person Giving Notice
City, State, Zip of Person Giving Notice

Worthless Check Program Information

As a victim of a worthless check, you may file this report with the Seminole County Sheriff's Office, provided there is sufficient information and that the check meets all eligibility guidelines. The Seminole County Sheriff's Office will seek full restitution for victims whenever possible, however, please keep in mind that the Worthless Check Program can make no recovery guarantees. By submitting this check to the program, you surrender control of the check to the criminal process and forego the opportunity to pursue civil dept collections.

Check writers are encouraged to make payments in full.
A check will be deemed ineligible and returned to you to pursue a civil remedy, if a filed check is later determined to be:
☑ A stop payment check where the issuer acted in good faith and with reasonable cause in stopping payment,
☑ A check issued by someone not competent or of legal age,
☑ A check dishonored due to bank error or failure to notify the check writer of bank adjustment of a check,
☑ A check issued to pay an obligation arising from an illegal transaction.

What to do after your Affidavit is filed with the Program

☑You may contact Seminole County Financial Crimes for case updates at any time.
☑ Please allow a minimum of 90 days to pursue restitution.
☑ If the check writer does not comply with the program, the case may be reviewed for possible criminal prosecution.
☑ If we are unable to recover restitution and/or the check is not eligible for prosecution, you may request the check(s) be returned to pursue a civil remedy.

Filing Instructions

1. Fill out Affidavit **completely**.
2. Attach check(s) and copy of the Notification Letter, as well as all supporting documents such as the *Certified Mail Return Receipt and Undelivered Letter,* if applicable.
3. Mail Worthless Check Affidavit and all other correspondence to the address listed on the front of this Affidavit.
4. Once a report has been filed, the check writer will be given 60 days to make payment directly to you. Please provide them with a receipt and forward a copy to Seminole County Sheriff's Office.

For additional information or affidavits, go to www.SeminoleSheriff.org or   call (407) 665-6850