

Application for Worthless Checks Process

Name of Defendant

First Middle Last

Race / Sex/ Date of Birth

/ /

Driver's License Number and
State

Address

Telephone Number

.....
Name of Business

Federal Taxpayer ID number

Name of Affiant

Address

Telephone Number

.....
Check Delivered/ Made Payable to:

Bank Check Drawn Upon

City of Bank

Amount of Check

Check Number / Date of Check

/ _____