



Miami - Dade County State Attorney
 Bad Check Restitution Program
 PO Box 350160
 Miami, FL 33135-0160

Katherine Fernandez Rundle
 State Attorney

CHANGE SERVICE REQUESTED

Office Hours: 9:00 a.m. - 7:00 p.m.

OFFICIAL NOTICE - IMMEDIATE ATTENTION REQUIRED

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 JOHN Q PUBLIC
 PO BOX 12345
 BOSTON CA 02120-2121



Phone: (800)832-7361
 Date of Notice: 03/19/2008
 Case #: MIA28960477-0077
 Balance Due: \$223.55
 Page: 1

This Office has received a report(s) of criminal activity alleging you have issued a worthless check in violation of Chapter 832 of Florida Statutes. A felony conviction under this statute is punishable by up to five (5) year in prison and/or a fine up to \$5,000. Misdemeanor crimes are punishable by up to sixty (60) days in jail and/or \$1000 in fines. See page 3 for details on the party(s) initiating this allegation.

However, you may avoid a court appearance by participating in the Miami-Dade County State Attorney Diversion Program. The Diversion Program has two steps:

1. Pay full restitution on all reported checks, plus any administrative, returned item, and program fees.
2. Attend a Financial Accountability class.

is Office will not initiate prosecution proceedings against individuals who comply with the Diversion Program.

**Miami - Dade County State Attorney Bad Check Restitution Program
 Balance Due: \$223.55**

Failure to pay in full and schedule class within TEN (10) DAYS from the date of this Notice may result in your case being forwarded for criminal prosecution.

PLEASE CALL (800)832-7361 TO MAKE PAYMENT/SCHEDULE CLASS

Please have your case number ready: MIA28960477-0077

PAYMENTS ACCEPTED: CREDIT & DEBIT CARDS, WESTERN UNION, MONEY ORDERS, OR CASHIER'S CHECK

The Diversion Program is an optional alternative to court proceedings. If you successfully complete the program, there will be no court record of this matter.

FOR ADDITIONAL INFORMATION OR IF YOU BELIEVE THIS NOTICE WAS SENT TO YOU IN ERROR AND/OR YOU WISH TO CONTEST THE CHARGE(S), PLEASE SEE THE REVERSE SIDE.

See reverse side →

To Make Payment/Schedule Class, Call (800)832-7361 or www.checkprogram.com

Case Number: 28960477 Password: 27194632

PAYMENTS ACCEPTED: CREDIT & DEBIT CARDS, WESTERN UNION, MONEY ORDERS, OR CASHIER'S CHECK

■ **IF YOU BELIEVE YOU RECEIVED THIS NOTICE WAS SENT TO YOU IN ERROR OR WISH TO DISPUTE, YOU MUST NOTIFY US IN WRITING:**

- Review your records CAREFULLY
- Call the State Attorney's Bad Check Restitution Program Office at **(800)832-7361**
- Ask for a Case Coordinator
- Explain the error
- The Case Coordinator will ask you to fax or mail in documentation of the error. With cases involving stop payments on checks or performance disputes, please consult a Case Coordinator for more information.
- You may dispute the validity of this allegation in writing to this Office within 30 days of receiving this Notice. Upon submitting your written dispute not later than 30 days after receiving this Notice (along with any relevant supporting documentation), an authorized member of this Office will make a determination as to the validity of this written dispute and that there is probable cause to believe that a crime has been committed before any further restitution efforts are pursued.

■ **IF YOU BELIEVE YOU RECEIVED THIS NOTICE AS A RESULT OF IDENTITY THEFT, FORGERY, THEFT, OR OTHER FRAUD:**

You will be required to promptly provide further written documentation to support your claim. If you are a victim of identity theft, you will need to go to the bank to obtain and sign an identity theft affidavit. If you were not the victim of identity theft but did not write the check(s), you will need to go to the bank to obtain and sign an affidavit of forgery that you did not write the check(s) in question. In most cases, if you believe the check(s) were stolen or forged, you will also be required to file a police report.

■ **IF YOU BELIEVE YOU WERE NOT PROPERLY NOTIFIED:**

The State Attorney's Office accepts ONLY reports of bad check criminal activity from those businesses or parties that have DOCUMENTED attempts to notify you according to Florida Statutes. In addition to notification from the party you issued the check to, banks routinely send customers notice of returned items. Non-sufficient funds (NSF) checks also appear on your monthly account statement. **PLEASE CHECK YOUR RECORDS CAREFULLY.**

■ **IF YOU HAVE ALREADY PAID THE MERCHANT OR FILING PARTY:**

Please fax or mail documentation that the merchant or filing party received payment BEFORE the date of this Notice. Appropriate documentation consists of a receipt of payment to the merchant and/or a cleared copy (front and back) of repayment to the merchant. Allow our Office fourteen (14) days to process your information before calling. Our Office will determine the appropriate course of action and contact you by phone and/or letter.

- Fax or mail your case documentation to: **Fax: (800) 227-3041**

**Miami - Dade County State Attorney
Bad Check Restitution Program
PO Box 350160
Miami, FL 33135-0160**

■ **IF YOU DO NOT WISH TO CONTEST THIS IN WRITING AND WISH TO APPEAR IN COURT:**

If you want to contest this action or appear in court, **you may want to consult an attorney. Personal bankruptcies DO NOT void responsibility in a criminal matter.** Contact this Office and inform us of your decision.

■ **OTHER IMPORTANT INFORMATION:**

Successful completion of the Bad Check Restitution Program requires that you fulfill ALL State Attorney requirements. Failure to pay full restitution and program fees or attend class may subject you to criminal court proceedings. Payments made pursuant to a payment plan may be allocated ratably between restitution and program fees until both obligations are fully satisfied. Program fees are non-refundable. You may wish to consult an attorney to obtain legal advice about your rights in regards to this matter.

The Program does not accept personal checks. Sending a personal check for payment shall be deemed sufficient authorization to complete the payment via electronic debit. By doing so, your checking account will be debited for the amount of the check and your cancelled check will not be returned to your bank. Electronic debit entries returned for insufficient or uncollected funds may be resubmitted once following the return of the original entry.

Payments exceeding the balance due by more than \$5.00 will be returned, less a \$5.00 handling fee.

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Case Number: 28960477 Password: 27194632

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 Page: 3 of 3

OFFICIAL NOTICE - IMMEDIATE ATTENTION REQUIRED

BALANCE DUE ON 03/29/2008

\$223.55

PAYMENT OPTIONS:

- 1. INTERNET www.checkprogram.com
 Case Number: 28960477
 Password: 27194632
 Credit and Debit Cards

- 2. PHONE (800)832-7361
 Credit and Debit Cards or Western Union

- 3. MAIL **Miami - Dade County State Attorney**
 Bad Check Restitution Program
 PO Box 350160
 Miami, FL 33135-0160
 Money Orders and Cashier's Checks Only

VICTIM	CHECK #	DATE	AMOUNT	RETURNED ITEM FEE	ADMIN FEE	TOTAL THIS CHECK
NAVARRO DISTRIBUTION	1018 S	1/26/2008	\$18.55	\$25.00	\$25.00	\$68.55
Financial Accountability Class Fee						\$155.00
TOTAL BALANCE DUE:						\$223.55

*** Additional service fee may be due victim. ***

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