

FOR DA OFFICE USE ONLY

P.I.D. #: \_\_\_\_\_

PCT.#: \_\_\_\_\_

## Dallas County Theft by Check Complaint Issuance of Bad Check Complaint

**In the name and by the authority of the STATE OF TEXAS  
PERSONALLY APPEARED before me the undersigned authority this affiant, who after  
being duly sworn by me makes the following statement under oath:**

I have a good reason to believe and do believe that one \_\_\_\_\_  
hereinafter styled Defendant, heretofore on or about the \_\_\_\_\_ day of \_\_\_\_\_, 20 \_\_\_\_.  
In the County of Dallas, State of Texas, did unlawfully and knowingly, then and there issue and pass a  
check to \_\_\_\_\_, an agent of \_\_\_\_\_,  
at the address of \_\_\_\_\_, within the boundaries of  
Justice of the Peace, Pct. \_\_\_\_\_, of the said County and State.

### FACTS ABOUT THE DEFENDANT (ACCUSED)

Name of person who **signed** this check \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_ Phone: \_\_\_\_\_

Sex: \_\_\_\_\_ Ht: \_\_\_\_\_ Wt.: \_\_\_\_\_ Eyes: \_\_\_\_\_ Hair: \_\_\_\_\_ DOB: \_\_\_\_\_ Race: \_\_\_\_\_

SSN: \_\_\_\_\_ TX/DL#: \_\_\_\_\_ Amount of: \$ \_\_\_\_\_ Check No: \_\_\_\_\_

Date written: \_\_\_\_\_ Acct. #: \_\_\_\_\_

Location where check received: \_\_\_\_\_

City: \_\_\_\_\_ County \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Check was received:  From Accused  In Person  By Mail  Other

Check was exchanged for:  Property  Service  Other

Bank Returned Check Stamped:  NSF  Account Closed  Certified Letter Sent  Other

Check was:  Deposited w/in 30 Days  Post Dated  A Held Check

### AFFIANT

Name: \_\_\_\_\_ Business Name: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Home No.: \_\_\_\_\_ Business No.: \_\_\_\_\_

Name of person who took check: \_\_\_\_\_

Drivers License and or other identification presented by accused: \_\_\_\_\_

Against the peace and dignity of the State.

\_\_\_\_\_  
Affiant/Complainant

Subscribed and sworn to before me on this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_

\_\_\_\_\_  
Notary Public in and for the

STATE OF TEXAS

My Commission Expires: \_\_\_\_\_

ITEMS TO BE SUBMITTED WITH THIS COMPLAINTS

THE ORIGINAL CHECK

THE CERTIFIED LETTER OR GREEN CARD

RECEIPTS AND INVOICES

COPY OF DEMAND LETTER