



Barron County Sheriff's Department

SHERIFF
Chris D. Fitzgerald
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CHIEF DEPUTY
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WORTHLESS CHECK REFERRAL FORM

INFORMATION ABOUT THE CHECK

Name on check: _____ Amount: \$ _____

Date of check: _____ Check No.: _____

What was the check written for? _____

Was this check: YES NO

A two party check?

A hold or post-dated check?

Written to pay past bill/charge?

Did the issuer write the check in employee's presence?

Did the employee know the issuer personally?

If not, can employee identify issuer?

Has anyone contacted the issuer about the check?

If so, Who, When, How and What did the issuer say?

INFORMATION ABOUT YOU

Name: Business _____ Person Taking Check _____

Address: _____

City: _____

Phone: _____

Other information to help the sheriff's office locate and/or identify the issuer:

Name of person completing the form

Date

Barron County Justice Center Room 1200 • www.barroncountyiwi.gov

1420 State Highway 25 North • Barron, Wisconsin 54812-3007

ADMINISTRATION
(715) 537-5814

DISPATCH
(715) 537-3106

JAIL
(715) 537-5559

ADMINISTRATION FAX
(715) 537-6615