

**AFFIDAVIT FOR ISSUANCE OF BAD CHECK
IN THE NAME AND BY AUTHORITY OF THE STATE OF TEXAS:**

BEFORE ME, the undersigned authority, on this day did personally appear complainant, who being duly sworn, charges and swears that complainant has good reason to believe and does believe that one _____ (name) hereinafter styled Defendant, heretofore on or about the _____ day of _____, 200____, in the County of San Jacinto, State of Texas, did unlawfully and knowingly issue or pass a check or similar sight order to _____(merchant's name) for the payment of money being in the tenor following:

Name: _____

Address: _____

CHECK NO. _____, **DATED:** _____
PAYABLE TO THE ORDER OF: _____ **IN THE**
AMOUNT OF \$ _____ **SIGNED BY** _____ **DRAWN**
ON THE BANK OF _____ **ACCT. NO.**

and the said Defendant knowing at the time of the issuance and passing of the aforesaid check that he did not have sufficient funds on deposit with the bank on which said check was drawn for the payment in full of the check as well as all other checks and orders then outstanding.

I, the Complainant, **an individual, owner, employee, agent (circle one)** of _____ have knowledge of the above facts and such examination of the records, which included the check given the Defendant, shows that the check was presented to the bank within thirty days after it was issued by the Defendant and it was returned unpaid, on its face such check, through markings placed on the check by the bank, was dishonored and **returned marked " _____ "**.

The records also show that if the check was marked anything other than "**Account Closed**", a written notice was sent to the Defendant by certified mail with return receipt requested and further show that as of the date of this affidavit, the Defendant has not paid the check.

Against the peace and dignity of the State.

Sworn to and subscribed before me this the _____ day of _____, 200____.

Additional contact information on the Defendant: Date of birth: _____ Driver's License #: _____ Any Other Information: _____ _____ _____ _____
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Complainant Signature

Complainant Printed Name

Judge, Court Clerk, Notary Public