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# BAD CHECK COMPLAINT FORM

## FIFTEENTH JUDICIAL CIRCUIT—PALM BEACH COUNTY

### OFFICE OF THE STATE ATTORNEY

01-10-2017

**Bad Check Program Address:**  
P.O. Box 3855  
West Palm Beach, FL 33402-3855

**Bad Check Program Contact:**  
(855) 208-1309 - Victim Services Hotline  
(855) 252-9820 - Check Writer Hotline  
(Please refer check writer to the "check writer" hotline)

For more information: [checkprogram.com/15thjudicialfl](http://checkprogram.com/15thjudicialfl)

**Step 1**  
Confirm Eligibility

**The following types of checks are ineligible for the program:**

- \*Two-party checks
- \*Payroll or credit card checks
- \*Checks passed outside of Palm Beach County
- \*Partially re-paid checks
- \*Post/pre dated or altered checks
- \*Checks which are repayment of loan or civil contract agreement
- \*Fraudulent or stamped lost/stolen/forged
- \*Checks you agreed to hold before depositing

**Step 2**  
Victim Information

Victim/Merchant Name: South Florida Vision

Contact Name: Paige Penewit Title: Accounting

Victim Contact Information: Email: ppenewit@2020eyecareplan.com

Phone: ( 954 ) 917-2337 ext 1032 Fax: ( 954 ) 657-9809

*Email and/or fax are required for acknowledgement receipt of check and/or Program communication*

Address: 2900 W Cypress Creek Road #4 City: Fort Lauderdale State: FL Zip Code: 33309

**Step 3**  
Check Writer Information

Check Writer's Name: Jessyka Hernandez

Address: 2771 10th Ave N Apt 307 City: Palm Springs State: FL Zip Code: 33461

Home Phone: ( 561 ) 891-9526 Other Phone: ( )

Driver's License #: H655-433-81-796-1 State: FL Date of Birth 08/16/81 / / Expiration Date 8 / / 16 /

Social Security Number: [REDACTED] Height: 5 , 6 Weight: 155

Hair: Brown Eye Color: Brown Race: White Gender: M  X F Age: 35

A "Statutory Notice" must be sent to recover the bad check(s) in question to the check writer via U.S. Certified Mail. If no attempt has been made, the check is not eligible for prosecution. (See sample statutory notice on back.)

**Step 4**  
Check Information

| Ck. No.       | Date Passed    | \$ Amount       | Name of person accepting check (if no longer employed please list manager) | Was check For?                                    | Call Person ID check writer? |
|---------------|----------------|-----------------|--|---|------------------------------|
| <u>263</u>    | <u>9/7/16</u>  | <u>\$200.00</u> | <u>Kristin Bullard</u>   | <input checked="" type="checkbox"/> Exam, glasses | <input type="checkbox"/> No  |
| <u>268</u>    | <u>9/21/16</u> | <u>\$57.00</u>  | <u>Kristin Bullard</u>   | <input checked="" type="checkbox"/> Exam, glasses | <input type="checkbox"/> No  |
| <u>16 269</u> | <u>9/22/16</u> | <u>\$295.00</u> | <u>Kristin Bullarda</u>  | <input checked="" type="checkbox"/> Exam, glasses | <input type="checkbox"/> No  |

Address where check was accepted (if different than above in Step 2): 6266 S Congress Ave #9 (Required)

City: Lantana State: FL Zip Code: 33462

**Step 5**  
Affidavit of Mailing & Victim Verification  
Must Be Notarized

**AFFIDAVIT OF MAILING**

I, Paige Penewit do hereby swear or affirm that I sent the statutorily required notice to check writer, Jessyka Hernandez at 2771 10th Ave N #307-Palm Springs 33461, the address on check or given at issuance. The notice was mailed, on the 21st day of October, 20 16, by first-class United States Mail.

**I HAVE READ ALL FILING INSTRUCTIONS, AND HEREBY CERTIFY UNDER PENALTY OF PERJURY, THAT ALL INFORMATION IN THIS REPORT IS TRUE TO THE BEST OF MY KNOWLEDGE.**

X Paige Penewit Signature of Person Filing (Required) Paige Penewit Print Name of Person Filing 12/28/2016 Date Filed

Sworn and subscribed before me this 28th day of December, 2016

Notary Public: Deborah Arasi Seal

**DEBORAH ARASI**  
MY COMMISSION # FF837801  
EXPIRES November 19, 2019  
FloridaNotaryService.com

Staple original or bank-generated substitute check here