Pasadena Police Department

	-								
FRAUDULENT	DOCUMENT								
REPORT									

										1	<i>D</i> ,	TE REPORTED	MAIL	WALK
LOCATION OF ACCEPTANCE DATE/TIME ACCEPTED														
								F	REASON(S) CHECK PASSED					
REASON CHECK REJECTED BY BANK AMOUNT OF LOSS									1 0	☐ CASH ☐ ACCOUNT PAYMENT				
				\$							☐ RENT PAYMENT			
WILL '	VICTIM/ACCEPTOR	APPEAR		POSTDATED PREDATED AGREEME					TO HOLD		☐ MERCHANDISE ☐ SERVICES			
IN CO	URT YES NO (YES NO YES NO YES					NO 🗀		OTHER (Specify)			
WRITTEN OR ENDORSED IN ACCEPTOR'S SPECIFY WHAT PARTS (FACE, ENDO									r, ETC.)	,	JITE	.R (Specify)		
PRESE	ENCE YES NO													
	VICTIM'S NAME (FIRM NAM	ME IF BUS.	JS.) RESIDENCE ADDRESS ZIP								RES. PHONE		
Σ											BUS. PHONE			
VICTIM	DAYS OFF/WORK	ING HOU	RS	В	USINESS A	DDRESS			ZIP		TYP	E OF BUSINESS	SEX	AGE
<u>o</u>	REPORTING PER	SON'S NA	ME	. R	ESIDENCE	ADDRESS			ZIP			RES. PHONE		
ĔÈ												BUS. PHONE		
REPORTING PARTY	DAYS OFF/WORKING HOURS BUSINESS ADDRESS ZIP									TYP	E OF BUSINESS	SEX	AGE	
RE														
ŭ	NAME OF PERSON TO WHOM SUSPECT RESIDENCE ADDRESS ZIP										RES. PHONE			
PT0	PRESENTED CHECK											BUS. PHONE		
ACCEPTOR	DAYS OFF/WORKING HOURS BUSINESS ADDRESS ZIP								ZIP		TYP	E OF BUSINESS	SEX	AGE
Ă												<u> </u>		
_	IN CUSTODY YES NO	SEX	RACE	AGE/DOB	HEIGHT	WEIGHT	HAIR	EYES	COMPLEXION	OTHER	IDEN	ITIFIERS (Scars,	Tatoos, Jewel	ry, etc.)
SUSPECT	NAME AND ADDRESS USED BY SUSPECT											PHONE	•	
USF														
S	DRIVER'S LICENSE NO. OTHER IDENTIFICATION USED VEHICLE LICENSE STAT									TATE	M	AKE/MODEL	COLOR(S)	YEAR
	SUMMARIZE THE	SUSPECT	T'S ACTION	IS IN PASSING	THE CHE	СК								
METHOD OF OPERATION														
RAT														
ᇤ														
≥0	-													
												_		

THIS SPACE FOR PD USE ONLY

CASE NUMBER

CLASSIFICATION

XR

CONTINUE ON BACK, DO NOT WRITE BELOW THIS LINE, (FOR POLICE DEPARTENT USE ONLY)

INSTRUCTIONS:

- A. Report must be typed or printed in black ink.
- B. A separate report must be completed for each check.
- C. Show check to acceptor and obtain detailed suspect description.
- D. Have both acceptor and okayer (supervisor approving acceptance) place initials on the left edge of check face.
- E. Addresses must be complete including street address, city and zip code.
- F. The original check must accompany the report.
- G. If you desire to have a record for tax purposes, make a copy of the check prior to delivering it to the police department.
- H. If suspect has check cashing card application on file with business, a copy must accompany report.
- I. Bring or mail report and check to Forgery Detail, Pasadena Police Department, 207 N. Garfield Ave., Pasadena, CA 91101, Phone (818) 405-4576.
- J. If you need additional forms, indicate number and return address on separate paper.

PPD 2408					
Copies to	Copies by	APPROVED	OFFICER	I.D. No.	DATE/TIME
	i				

Copies to

SS	NAME RESIDENCE ADDRESS								ZIP RES. PHONE				
WITNESS OR OKAYER	DAYS OFF/WORKIN	NG HOUF	RS.	В	BUSINESS ADDRESS			ZIP	TY	PE OF BUSINESS	SEX	AGE	
ωZ	ASSISTED SUSPECT YES NO NO NAME AND ADDRE		RACE D BY COM	AGE/DOB PANION OTHER IDEN	HEIGHT	WEIGHT	HAIR	EYES	COMPLEXION	OTHER	ENTIFIERS (Scars, PHONE	Tatoos, Jewelry,	etc.)
Itemize any property obtained including Model No., Serial No., and article value. This space may also be used for additional details conti											ued from front	page.	
DESCRIPTION OF LOSS													
ATTEMPTS TO CONTACT	List attempts to o	contact	suspect wi	th approximate	e dates and	results of	each atte	mpt.					
						-				·			
ATTE									·				
	Does suspect hav	ve check	ing cashin	g card inform	ation on fi	le? Yes 🗌	No 🗆 II	YES, SU	PPLY COPY OF	SAME.			
CERTIFICATION	I certify that all the information provided herein is true and correct to the best of my knowledge. I understand that reporting that a felony or misdemeanor has been committed while knowing such report to be false is punishable by imprisonment in the county jail not exceeding six months, or by fine not exceeding \$500.00, or by both (P.C. 148.5,19). Signed												
	DO NOT WRITE B	BELOW T	HIS LINE	(FOR POLICE	DEPARTME	NT USE ON	LY).						

Approved

Copies by

Officer

I.D. No.

Date/Time