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IN THE UNITED STATES DISTRICT COURT
FOR THE NORTHERN DISTRICT OF CALIFORNIA

<p>KEVIN BREAZEALE, KAREN SOLBERG and KEVIN HIEP VU, on their own behalf and on behalf of others similarly situated,</p> <p style="text-align: center;">Plaintiffs,</p> <p>v. VICTIM SERVICES, INC., d/b/a CorrectiveSolutions , NATIONAL CORRECTIVE GROUP, INC. d/b/a CorrectiveSolutions, and MATS JONSSON,</p> <p style="text-align: center;">Defendants.</p>	<p>No.</p> <p>COMPLAINT FOR DAMAGES, INJUNCTIVE AND OTHER EQUITABLE RELIEF FOR VIOLATIONS THE FAIR DEBT COLLECTION PRACTICES ACT, [15 U.S.C. §§ 1692, <i>et seq.</i>] AND CALIFORNIA UNFAIR COMPETITION LAW [Cal. Bus. & Prof. Code §§ 17200, <i>et seq.</i>]</p> <p><u>CLASS ACTION</u></p> <p>DEMAND FOR TRIAL BY JURY</p>
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Plaintiffs allege on their own behalf, on behalf of others similarly situated, and on behalf of the general public, as follows:

I. INTRODUCTION

1
2 1. The plaintiffs are three California consumers who received a series of letters
3 threatening them with criminal prosecution unless they paid alleged debts arising from dishonored
4 checks. The letters all bore the seal and letterhead of a county district attorney.

5 2. What the plaintiffs did not realize was that these letters—although they appeared to
6 come from California district attorneys—were actually sent by Defendant CorrectiveSolutions, a
7 private debt-collection business. The letters claimed that the plaintiffs would face criminal
8 prosecution unless they paid the amounts owed on their checks plus over \$200 in illegal fees.
9 CorrectiveSolutions operates much like any other high-volume debt collector: It solicits business
10 from national retailers and other merchants and then attempts to collect on dishonored checks using
11 standardized collection notices. But there is one crucial difference: Under CorrectiveSolutions’ “Bad
12 Check Restitution Program,” the company pays county district attorneys for the use of their seal and
13 letterhead, thereby disguising its ordinary civil debt collection as law enforcement. It is
14 CorrectiveSolutions’ business model to scare consumers into believing that they are the subject of
15 real criminal proceedings and that unless they “agree” to pay for an expensive “diversion” program,
16 they may be arrested, prosecuted, and even imprisoned.

17 3. CorrectiveSolutions’ programs violate both state and federal consumer-protection
18 law governing collection abuses. The programs also disregard the requirements imposed by
19 California permitting bad check diversion program for real criminal suspects. Just a few weeks ago,
20 moreover, the American Bar Association issued a formal ethics opinion condemning the practices of
21 companies like CorrectiveSolutions and concluding that they are engaged in the unauthorized
22 practice of law. *See* ABA Formal Ethics Opinion 469 (Nov. 12, 2014), attached as Exhibit 10. The
23 opinion emphasizes that such practices are “deceptive” because they “misuse the criminal justice
24 system by deploying the apparent authority of a prosecutor to intimidate an individual,” and are also
25 “abusive” because they convey “the impression that the machinery of the criminal justice system has
26 been mobilized” against the consumer.

27 4. In violation of applicable legal and ethical standards, CorrectiveSolutions uses false
28 and misleading threats of criminal prosecution to intimidate Californians who have written checks
that are dishonored by the bank. The plaintiffs bring this lawsuit to end Defendants’ unlawful

1 practices in California and recover for consumers the unlawful fees that the Defendants have
2 collected.

3 **II. JURISDICTION AND VENUE**

4 5. This Court has jurisdiction over Plaintiffs' claims under the Fair Debt Collection
5 Practices Act ("FDCPA"), under 15 U.S.C. § 1692k(d) and 28 U.S.C. § 1331. This Court has
6 supplemental jurisdiction over Plaintiffs' state law claims under 28 U.S.C. § 1367.

7 6. Venue is proper in this District under 28 U.S.C. § 1391(b) because a substantial part
8 of the events giving rise to Plaintiffs' claims occurred in this District and Defendants are subject to
9 personal jurisdiction in this District.

10 **III. PARTIES**

11 7. Plaintiff Kevin Breazeale is an individual residing in Alameda County, California.

12 8. Plaintiff Karen Solberg is an individual residing in Sacramento County, California.

13 9. Plaintiff Kevin Vu is an individual residing in Orange County, California.

14 10. Defendant Victim Services, Inc., d/b/a CorrectiveSolutions is a Delaware corporation
15 with its principal place of business in San Clemente, California. It operates in California and a
16 number of other states.

17 11. Defendant National Corrective Group, Inc., d/b/a CorrectiveSolutions, is a Delaware
18 corporation that has or had its principal place of business in San Clemente, California. It operated in
19 California and a number of other states. Plaintiffs allege, on information and belief, that in
20 approximately June 2014, National Corrective Group, Inc. sold the CorrectiveSolutions business to
21 Victim Services, Inc. and that after the sale, Victim Services, Inc. took over operation of the
22 collection business that is the subject of this lawsuit. Unless otherwise stated, when plaintiffs refer
23 to CorrectiveSolutions in this Complaint, they are referring to the CorrectiveSolutions business,
24 whether operating under the corporate ownership of National Corrective Group, Inc., or of Victim
25 Services, Inc.

26 12. Defendant Mats Jonsson is or was the CEO of National Corrective Group, Inc., and is
27 the CEO and principal shareholder of Victim Services, Inc. On information and belief, plaintiffs
28 allege that Jonsoon created Victim Services Inc. for the purpose of owning and operating the
CorrectiveSolutions check collection business, that Defendant Jonsson designed, developed,

1 implements, promotes, and materially participates in CorrectiveSolutions' check collection business.
2 He determines and exercises actual control over the collection policies and practices at issue in this
3 lawsuit.

4 13. Defendant CorrectiveSolutions and Defendant Jonsson (collectively "Defendants")
5 use the instrumentalities of interstate commerce and the mails in a business the principle purpose of
6 which is the collection of debts. Defendants collect, or attempt to collect, debts owed, or allegedly
7 owed, to others and are "debt collectors" within the meaning of 15 U.S.C. § 1692a(6).

8 14. Defendants are not employees of any California district attorney.

9 IV. CALIFORNIA'S BAD CHECK DIVERSION ACT

10 15. In California, "bad check diversion programs" are governed by statute. *See* Bad
11 Check Diversion Act, Cal. Penal Code § 1001.60 *et seq.* ("Diversion Act"). The Diversion Act
12 permits county boards of supervisors to authorize county district attorneys to create bad check
13 diversion programs if the supervisors determine that sufficient funds exist to run the program. Cal.
14 Penal Code § 1001.60. District attorneys may contract with private companies to conduct authorized
15 programs. *Id.*

16 16. The Diversion Act permits district attorneys to refer check writers to bad check
17 diversion programs only if "there is probable cause to believe" that the person violated California's
18 "Bad Check Law," California Penal Code § 476a. Cal. Penal Code § 1001.60.

19 17. Under the California Penal Code, it is not a crime simply to present a check that is
20 later dishonored. Cal. Penal Code § 476a. To the contrary, the statute is explicitly limited to a person
21 who, "willfully, with intent to defraud," presents a check, "knowing at the time" that there are not
22 sufficient funds in the account to cover the check. *Id.*

23 18. The Diversion Act requires district attorneys to make two distinct and necessary
24 individualized determinations in each and every case referred to a "bad check diversion program."
25 First, the district attorney must find probable cause to believe that the check writer had the necessary
26 fraudulent intent when he or she presented the check. Second, before referring a case to the
27 diversion program, the district attorney must consider the five factors set forth in California Penal
28 Code Section 1001.62.

1 19. The Diversion Act does not permit a district attorney to make a blanket determination
2 that all checks fitting particular criteria may be referred to a diversion program, and dispense with
3 an individualized review of the evidence in each case.

4 20. Once a district attorney properly decides to refer a particular check writer to a
5 diversion program, the district attorney may require the check-writer participant, as a condition of
6 avoiding prosecution, (a) to complete a class, (b) to make full restitution to the victim for the
7 amount of the check and for bank charges incurred by the victim and (c) to pay in full “the diversion
8 fees, if any, specified in Section 1001.65.” Cal. Penal Code § 1001.64.

9 21. Section 1001.65 authorizes two fees: first, a \$50 administrative fee and second,
10 reimbursement for bank charges actually incurred by the victim, up to a maximum of \$15 per check.
11 Cal. Penal Code §§ 1001.64–.65. No other charges or fees are authorized. Accordingly, the most a
12 bad check diversion program can charge a check writer in fees is \$65.

13 **V. DEFENDANTS’ BAD CHECK RESTITUTION PROGRAM**

14 22. Defendants operate a computer-driven collection business, using standardized forms,
15 demand letters, and procedures. The material difference between Defendants’ check collection
16 business and that of their competitors, is that Defendants pay district attorneys for permission to use
17 the name and authority of the district attorneys’ office. Defendants create the appearance that they
18 are operating a criminal diversion program, not a check collection business.

19 23. Unlike real criminal diversion programs, in Defendants’ program, no prosecutor has
20 reviewed the evidence, made a probable cause determination, or charged the check writer before he
21 or she is offered “diversion.” In fact, it is unlikely that a check writer that ignores the diversion offer
22 will be charged with a crime.

23 24. The driving force behind Defendants’ demands is to collect its fees, including its fee
24 for an expensive “Financial Accountability” class. Although Defendants demand fees for the class,
25 they do not in fact require check writers to attend the class.

26 25. Defendants’ standard forms, practices, and procedures are exemplified in the “Start
27 Up Packet” for the “Bad Check Restitution Program” prepared for Glenn County in 2013, a copy of
28 which is attached to this Complaint as Exhibit 1.

1 26. As Defendants' program materials demonstrate, Defendants typically receive
2 referrals directly from retailers and private collection agencies, not from district attorneys.
3 Defendants' major referral sources are national retailers like Target and Safeway, and large debt
4 collection entities such as Telecheck and Certegy. In advertising materials sent to retailers,
5 CorrectiveSolutions has touted its ability to harness the "DA brand."

6 27. Retailers and collections agencies transmit electronic check information to
7 Defendants for the purpose of collection.

8 28. Usually, the electronically transmitted information includes little more than is
9 available from reviewing the face of the check. Information necessary to make a probable cause
10 determination under the California's Penal Code, or to weigh the factors listed in the Diversion Act
11 is not provided. Unless Defendants have explicit information that a referred check fails to meet the
12 very broad "Intake Criteria," *see* Exhibit 1 at 5–6, Defendants will commence the collection process.

13 29. In some counties, prior to attempting collection of an individual's check, Defendants
14 obtain the district attorney's purported approval by sending the district attorney a list of new checks.
15 Defendants will begin collections unless the district attorney pulls a check from the list within a few
16 days. In other counties, Defendants skip even this step.

17 30. Defendants begin their uniform collections process by using the check information
18 they receive to generate form collection letters.

19 31. Throughout California, Defendants send check writers a series of form collection
20 letters that are substantially the same:

- 21 a. Each letter is on the official letterhead of a district attorney with whom
22 Defendants have contracted.
- 23 b. The only material differences in the letters Defendants send to check writers
24 in different counties is the name of the district attorney, letterhead, and seal
25 that appears on the letters. Defendants seek unlawful fees in each letter,
26 including a Financial Accountability class fee, but the amount of the charges
27 may vary from county to county.
- 28 c. Each letter is designed to appear as if it was sent by a district attorney's office
 and is an official communication from that office.

1 d. Each letter contains either an explicit or implicit threat to prosecute the check
2 writer if he or she fails to pay all fees associated with Defendants’ “Bad
3 Check Restitution Program.”

4 e. Defendants’ “Start-Up Packet” contains examples of each letter in their “core
5 letter series.” *See* Exhibit 1 at 16–24.

6 32. In addition to the form letters, Defendants contact check writers by email and
7 telephone, frequently repeating or amplifying their prosecution threats.

8 33. Despite its official appearance, the collection effort is driven and controlled by
9 CorrectiveSolutions, a private, for-profit collection company, which seeks to maximize the fees it
10 can extract from the Californians it deceives and intimidates.

11 34. CorrectiveSolutions’ relationship with district attorneys is governed by
12 CorrectiveSolutions’ form contract, which sets forth the fees it will charge check writers, the fees it
13 will pay district attorneys, and its allocation of partial payments.

14 35. CorrectiveSolutions’ contract with the El Dorado County district attorney’s office is
15 attached to this Complaint Exhibit 2. It is an example of CorrectiveSolutions’ form contract and
16 reflects the fees CorrectiveSolutions charges throughout California:

17	Administrative fee:	\$ 50
18	Diversion seminar fee	\$191 with automatic 3% annual increase
19	Restitution fee	\$ 15 maximum, based on merchant’s bank charge
20	Credit/debit card fee	\$10
21	Payment Plan late fee	\$10
22	Class rescheduling fee	\$25
23	Overpayment refund fee	\$5

24 *See* Exhibit 2 at 8. None of these fees are lawful because Defendants’ program does not comply
25 with the Diversion Act’s prerequisites.

26 36. Even if Defendants’ program was otherwise lawful, only the administrative and
27 restitution fees are permitted by the Diversion Act.

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1 37. Under CorrectiveSolutions' form contract with El Dorado County, Defendants pay
2 the district attorney 40% of the \$50 administrative fee. Defendants retain 100% of all other fees
3 collected. *See* Exhibit 2 at 9.

4 38. When a check writer sends in only a partial payment, Defendants allocate 50% to the
5 merchant and retain 50% for their fees. *See* Exhibit 2 at 9.

6 39. When CorrectiveSolutions threatens prosecution in its collection letters, it does not
7 know that the district attorney will prosecute if the check writer refuses to participate in its program
8 or pay the fees CorrectiveSolutions demands. In some cases, CorrectiveSolutions knows that the
9 district attorney will not initiate prosecution because the amount of the check falls below the district
10 attorney's established threshold for even considering prosecution.

11 40. Plaintiffs allege, on information and belief, that very few check writers to whom
12 NCG sends its collection letters will ever be prosecuted, even if the check writer makes only partial
13 payment, or no payment at all.

14 41. Defendants' letters provide a toll-free number for check writers with questions to
15 call. That number connects callers to Defendants' offices, where calls are answered by Defendants'
16 employees.

17 42. Check writers are led to believe that they are calling their local district attorney's
18 office. Defendants encourages county district attorneys to record a message scripted by Defendants,
19 which is played to check writers when the phone is answered.

20 43. The message states that to avoid the risk of prosecution, the check writer must enroll
21 in the Bad Check Restitution Program. An example of the script is in the Glenn County Start-Up
22 Packet. *See* Exhibit 1 at 31.

23 44. Check writers who call in are ultimately connected with Defendants' commission
24 employees, whose compensation is directly tied to the amount of money they collect from check
25 writers. Defendants' employees do not disclose that they work for a private company, and not the
26 district attorney. They routinely make express and implicit threats of prosecution to check writers
27 with whom they speak for the purpose of inducing payment.

28

1 **VI. DEFENDANTS INTIMADATED AND DECEIVED PLAINTIFFS**

2 **Kevin Breazeale**

3 45. Kevin Breazeale is 49 years old, and has been steadily employed with the same
4 company as an applications support engineer for more than six years. He has lived in Alameda
5 County for over two decades.

6 46. On or about September 14, 2013, Mr. Breazeale leased a car from Dublin Hyundai,
7 primarily for his personal and family use. Mr. Breazeale agreed to make \$847 monthly payments
8 and to pay a \$500 refundable security deposit. On or about September 14, 2014, Mr. Breazeale gave
9 Dublin Hyundai a check for \$500. The check was post-dated and Dublin Hyundai agreed to hold
10 the check for deposit.

11 47. Sometime after giving the check to Dublin Hyundai, Mr. Breazeale realized that the
12 he did not have enough money in his account to cover the check. He contacted Dublin Hyundai and
13 explained the situation, but the dealership had already deposited the check.

14 48. Dublin Hyundai agreed that Mr. Breazeale could cover the check with partial
15 payments. He paid \$250 in November 2013 and paid the \$250 balance in February 2014.

16 49. Mr. Breazeale is still leasing the car and making the monthly payments required
17 under the lease agreement.

18 50. Defendants sent Mr. Breazeale a letter dated January 17, 2014, a copy of which is
19 attached to this Complaint as Exhibit 3. The letter appeared to be from the “Alameda County
20 District Attorney Bad Check Restitution Program.” It demanded payment for the check to Dublin
21 Hyundai and additional fees. The letter was titled:

22 **OFFICIAL NOTICE - IMMEDIATE ATTENTION REQUIRED**

23 The letter was on the letterhead of the Alameda County District Attorney, bore the signature block
24 and signature of “Nancy O’Malley, District Attorney,” and listed a “Case number.”

25 51. The letter said Mr. Breazeale was accused of a crime punishable by up to a year in
26 prison. The letter said that Mr. Breazeale could avoid the possibility of further action by
27 participating in the “Bad Check Restitution Program.” The letter also said that Mr. Breazeale had to
28 attend a Financial Accountability class and pay a total of \$730.00, consisting of the check amount
plus the following fees:

1 Admin Fee: \$50

2 Financial Accountability Class Fee: \$180

3 52. Mr. Breazeale was shaken and upset by the letter. He called the toll-free phone
4 number listed in the letter, which appeared to be the phone number for the Office of the Alameda
5 County District Attorney.

6 53. Mr. Breazeale explained that he had resolved the unpaid check issue with Dublin
7 Hyundai. Mr. Breazeale was directed to send in a receipt showing payment of the check and to wait
8 four or five days for a response. When he called back, he was told that the car dealer was demanding
9 payment of the full \$730.

10 54. As instructed by the first letter, Mr. Breazeale mailed a letter to the “Alameda
11 County District Attorney Bad Check Restitution Program,” disputing that he owed any money. Mr.
12 Breazeale incurred postage and stationary costs to send his letter.

13 55. Mr. Breazeale decided not to pay anything to the Bad Check Restitution Program
14 because he had paid the dealership and had not committed a crime.

15 56. Defendants sent Mr. Breazeale a second letter purporting to be from the “Alameda
16 County District Attorney Bad Check Restitution Program,” dated February 3, 2014. The letter was
17 titled:

18 **FAILURE TO RESPOND - IMMEDIATE ATTENTION REQUIRED**

19 The letter was on the letterhead of the Alameda County District Attorney, and bore the signature
20 block and signature of “Nancy O’Malley, District Attorney.” A copy of this letter is attached to this
21 Complaint as Exhibit 4.

22 57. The second letter told Mr. Breazeale that he had failed to respond or comply with the
23 “District Attorney’s Official Notice,” that he still owed \$730.00, and that he could still receive
24 continued phone calls or notices until he fulfilled the requirements of the District Attorney Bad
25 Check Restitution Program.

26 58. Mr. Breazeale consulted an attorney to determine his legal rights. To facilitate the
27 consultation he had to transmit relevant documents to the attorney, which he did, partially via a
28 commercial facsimile service, incurring costs for faxing.

1 59. Defendants sent Mr. Breazeale a third letter from the “Alameda County District
2 Attorney Bad Check Restitution Program,” dated March 6, 2014. The letter was titled:

3 **WARNING - SECOND NOTICE OF FAILURE TO COMPLY**

4 The letter was on the letterhead of the Alameda County District Attorney, and bore the signature
5 block and signature of “Nancy O’Malley, District Attorney.” A copy of the third letter is attached to
6 this Complaint as Exhibit 5.

7 60. The third letter said that Mr. Breazeale had failed to respond to notices regarding
8 California Penal Code 476a, that he still owed \$730, and that he could receive continued phone calls
9 or notices until he fulfilled the requirements of the District Attorney Bad Check Restitution
10 Program.

11 61. Mr. Breazeale may have received additional letters.

12 62. Mr. Breazeale did not pay fees for or attend the Financial Accountability class.

13 63. Mr. Breazeale has not been prosecuted.

14 **Karen Solberg**

15 64. Karen Solberg has lived in the Woodlake neighborhood in Sacramento for almost 20
16 years.

17 65. On approximately April 16, 2013, Ms. Solberg went to the office of Freeway
18 Insurance in Sacramento, to insure her personal vehicle. Ms. Solberg explained that she wanted to
19 purchase insurance, and wanted coverage for her daughter Emily as an additional driver of the
20 vehicle. Ms. Solberg was quoted a price, which she paid. She was told to return with Emily’s
21 driver’s license information.

22 66. When Ms. Solberg returned to the Freeway Insurance office, accompanied by her
23 daughter Emily, she was told that it would cost \$75 to add Emily. Ms. Solberg explained that she
24 had been told that there would be no additional charge. The Freeway Insurance representative
25 insisted that Emily could only be added if Ms. Solberg paid \$75.

26 67. Feeling she had no choice if she wanted Emily insured, Ms. Solberg wrote a check
27 for \$75 and left the office, confused and upset. She later called the Freeway Insurance office
28 supervisor and corporate offices, and was told that Freeway Insurance would not refund the
additional charge.

1 68. Ms. Solberg decided to stop payment of the \$75 check, cancel her Freeway
2 Insurance, and purchase insurance from another company. She did all three.

3 69. Subsequently, FedChex Recovery contacted Ms. Solberg seeking payment of the \$75
4 check plus a \$25 service charge. Because she had stopped payment as a result of her good faith
5 dispute regarding Freeway Insurance's charges, Ms. Solberg owed neither the check amount, nor
6 any additional charges.

7 70. Defendants sent Ms. Solberg a letter dated October 22, 2013, a copy of which is
8 attached to this Complaint as Exhibit 6. The letter appears to be from the "Orange County District
9 Attorney Bad Check Restitution Program," and seeks payment of a \$75.00 check to "Spot
10 Coverage." The letter was titled:

11 **OFFICIAL NOTICE - IMMEDIATE ATTENTION REQUIRED**

12 The letter was on the letterhead of the Orange County District Attorney, bore the signature block of
13 "Tony Rackauckas, District Attorney," and listed a "Case number."

14 71. The letter stated that Ms. Solberg was accused of committing a crime for which she
15 could be punished by up to a year in jail. The letter stated that Ms. Solberg could avoid the
16 possibility of further action and resolve the matter by participating in the "Bad Check Restitution
17 Program," which would require her to attend a Financial Accountability class and pay a total of
18 \$285.00, consisting of the check amount plus the following fees:

19 Admin Fee:	\$50
20 Financial Accountability Class Fee:	\$160

21 72. Ms. Solberg was disturbed, angered and frightened by the letter. She did not
22 understand why the Orange County District Attorney was threatening her over a check she had
23 written in Sacramento County, or why she was accused of a crime when she had stopped payment
24 on the check because of a dispute with an insurance company.

25 73. Ms. Solberg contacted the "Bad Check Restitution Program," but was unable to
26 persuade the Program to stop threatening her. She received at least three subsequent collection
27 demands, dated in December 2013 and January and February 2014, all on the letterhead of the
28 Orange County District Attorney, bearing the signature block of "Tony Rackauckas, District
Attorney," listing a "Case number," and demanding payment of \$285.

1 74. Ms. Solberg consulted an attorney to determine her legal rights. To facilitate the
2 consultation she had to transmit copies of the letters she had received, which she did via the U.S.
3 mails, incurring costs for postage and stationary.

4 75. Ms. Solberg did not pay any money to the “Orange County Bad Check Restitution
5 Program,” or attend a Financial Accountability class.

6 76. Ms. Solberg has not been prosecuted.

7 **Kevin Hiep Vu**

8 77. Kevin Hiep Vu, a graduate of Cal State-Long Beach, is a married father of one. He
9 is a longtime resident of Orange County, California, currently residing in Fountain Valley.

10 78. In March 2014 he had his car repaired at Herb’s Volvo, in Fullerton, California. He
11 was charged \$536.75 for repairs.

12 79. Mr. Vu did not have enough money in his checking account at that time to pay for
13 the repairs, so he wrote a check to Herb’s Volvo in the amount of \$536.75, with Herb’s Volvo
14 agreeing to hold the check for a few days until he could deposit money to cover the check.

15 80. Mr. Vu was unable to cover the check the following week. Herb’s Volvo deposited
16 the check and it did not clear.

17 81. Defendants sent Mr. Vu a letter dated June 19, 2014, a copy of which is attached to
18 this Complaint as Exhibit 7. The letter appeared to be from the “Orange County District Attorney
19 Bad Check Restitution Program.” The letter was titled:

20 **OFFICIAL NOTICE - IMMEDIATE ATTENTION REQUIRED**

21 The letter was on the letterhead of the Orange County District Attorney, bore the signature block of
22 “Tony Rackauckas, District Attorney,” and listed a “Case number.”

23 82. The letter stated that Mr. Vu was accused of committing a crime punishable by up to
24 a year in prison. The letter said that Mr. Vu could avoid the possibility of further action and resolve
25 the matter by participating in the “Bad Check Restitution Program.” This would require him to
26 attend a Financial Accountability class and pay a total of \$752.75, consisting of the check amount,
27 plus the following fees:

- 28 Admin Fee: \$ 50
- Financial Accountability Class Fee: \$160

1 91. Mr. Vu has not been prosecuted.

2 **VII. FACTS COMMON TO PLAINTIFFS AND THE CLASS**

3 92. Defendants subjected Plaintiffs and class members to the standardized collections
4 procedures described above.

5 93. Merchants and debt collectors who refer unpaid to checks to Defendants seek to
6 recover money, not report a crime. Most referrals consist of electronic check data obtained from the
7 face of the check. The referrals do not contain sufficient information to determine whether the
8 checks meet a district attorney's criteria for accepting checks, whether diversion is appropriate
9 pursuant to the Diversion Act, or to make probable cause determinations.

10 94. The form letters Defendants sent to Plaintiffs and class members contain numerous
11 material misrepresentations and omissions, including, but not limited to, the following:

- 12 a. The district attorney operates and controls a "Bad Check Restitution
13 Program" that is authorized by California law.
- 14 b. The letter was prepared and mailed by the district attorney, and is official
15 correspondence from the district attorney who has reviewed evidence and
16 determined that, absent diversion, prosecution is warranted.
- 17 c. Communications to the toll-free phone number and address printed on the
18 letter will be received and considered by the district attorney.
- 19 d. The check writer has been accused of a crime, namely violation of Penal
20 Code § 476a.
- 21 e. The check writer must enroll in a misdemeanor diversion program to avoid
22 probable criminal prosecution.
- 23 f. To avoid probable prosecution, the check writer must pay the check amount,
24 plus a \$50.00 administrative fee, a Financial Accountability Class fee of
25 \$160.00 or more, and other fees that may be assessed by the district attorney,
26 and must attend a Financial Accountability class.

27 95. The true facts are as follows:
28

- 1 a. The Bad Check Restitution Program is operated for profit by Defendants.
2 The district attorney has no meaningful involvement with individual cases.
3 The Program does not meet the Diversion Act's requirements.
- 4 b. Defendants, not employees of the district attorney, prepare and send the form
5 letters. Defendants send the letters without anyone in the district attorney's
6 office reviewing evidence or determining that prosecution is warranted.
- 7 c. District attorneys rarely review the facts related to the dishonored checks
8 referred to Defendants. If a district attorney investigates a case he or she does
9 so after Defendants collection efforts are complete.
- 10 d. The address and phone number on the form letters are contact points for
11 Defendants, not the district attorney.
- 12 e. The fees that Defendants demand are not permitted by California law.
- 13 f. Defendants do not require check writers to attend the Financial
14 Accountability class for which they demand fees. Defendants do not send
15 files to district attorneys for review if the check writer has paid all the fees
16 they demand, but has not attended the Financial Accountability class.

17 **VIII. CLASS ACTION ALLEGATIONS**

18 96. This action is brought as a class action, as follows:

19 **Umbrella class:** All persons to whom Defendants sent a collection demand in
20 connection with a returned check, purporting to be a letter from a California county
21 district attorney, within four years preceding the filing of this Complaint, whose
22 claims are not barred by the settlement in *Smith v. Levine Leichtman Capital*
23 *Partners, et al.*, Civ. No. 10-0010 (N.D. Cal.).

24 **FDCPA Subclass:** All members of the umbrella class, from whom Defendants
25 attempted to collect, or collected money for checks written for personal, family, or
26 household purposes, within one year preceding the filing of this Complaint.

27 97. Plaintiffs allege that the umbrella class and subclass (collectively "Class") are so
28 numerous that joinder of all members is impractical. The umbrella class contains in excess of
100,000 class members and the subclass includes tens of thousands of class members.

1 98. The numerous questions of law and fact common to the class include:

- 2 a. Whether Defendants made demands on all Class members that are the same
3 or similar to the demands made to Plaintiffs.
- 4 b. Whether Defendants falsely represent that their collection letters are lawfully
5 authorized, issued, or approved by a state official.
- 6 c. Whether the FDCPA governs Defendants' collections practices.
- 7 d. Whether Defendants' collections practices are unfair, fraudulent, or unlawful.
- 8 e. Whether Defendants fail to provide the validation notice required by the
9 FDCPA.
- 10 f. Whether Defendants fail to provide the debt collection warning required by
11 the FDCPA.
- 12 g. Whether Defendants threaten to take any action that cannot legally be taken
13 or that is not intended to be taken.
- 14 h. Whether Defendants falsely represent the character, amount, or legal status of
15 debts.
- 16 i. Whether Defendants represent or imply that nonpayment of debts will result
17 in the arrest or criminal prosecution of check writers when such action is not
18 intended.
- 19 j. Whether Defendants collect or attempt to collect fees that are not permitted
20 by law.
- 21 k. Whether Defendants use any business, company, or organization name other
22 than CorrectiveSolutions' true name.
- 23 l. Whether Defendants are engaged in the unauthorized practice of law.

24 99. Plaintiffs' claims are typical of the claims of the Class. All claims of Plaintiffs and
25 the Class are based on the same facts and legal theory.

26 100. Plaintiffs will fairly and adequately protect the interests of the Class. They have
27 retained counsel who are experienced in handling class actions and consumer debt cases. Neither
28 Plaintiffs nor their attorneys have any interests that may conflict with the interests of the Class.

1 telephone calls to sub-class members without any meaningful disclosure of
2 their identity.

- 3 b. **FALSE THREATS:** Defendants' standard form letters include the false
4 threat that the failure to pay all amounts demanded will result in the arrest or
5 imprisonment of the check writer, in violation of 15 U.S.C. § 1692e(4)–(5).
6 Defendants have neither the authority, nor the intent to initiate a prosecution,
7 and most check writers from whom Defendants attempt to collect are never
8 prosecuted, even if the check writer pays less than the full amount demanded.
- 9 c. **UNLAWFUL FEES:** The fees that Defendants charge for their Bad Check
10 Restitution Program are not permitted by California law. Defendants violate
11 15 U.S.C. §§ 1692e(2)(A) and 1692f(1) by collecting and attempting to
12 collect these fees.
- 13 d. **MISSING WARNINGS AND DISCLOSURES:** The initial form letter that
14 Defendants send to check writers, of which Exhibits 3, 6, and 7 are examples,
15 does not contain the validation notice required by 15 U.S.C. §1692g(a), nor
16 do Defendants provide the validation notice within five days of the initial
17 communication. None of the collection letters that Defendants send contain
18 the debt collection disclosure notice required by 15 U.S.C. § 1692e(11).

19 106. As a direct and proximate cause of Defendants' violations of the FDCPA, Plaintiffs
20 and the Class have suffered actual damages, including unlawful collection charges and other
21 monetary losses. In addition, Plaintiffs and the Class are entitled to recover statutory damages of up
22 to \$1,000 for each named plaintiff, and such amounts as the court may allow for all other class
23 members not to exceed the lesser of \$500,000 or one percent of the net worth of each debt collector,
24 plus the costs of the action, including reasonable attorneys' fees.

25 **COUNT II**
26 **(Cal. Bus. & Prof. Code §§ 17200 et seq.)**

27 107. Plaintiffs reallege and incorporate by reference each and every allegation set forth in
28 the preceding paragraphs.

1 108. The California Unfair Competition Law, (“UCL”), California Business & Professions
2 Code §§17200, *et seq.*, prohibits business acts or practices that are (a) unlawful, (b) unfair, or (c)
3 fraudulent. The UCL provides that a court may order equitable relief, including injunctive relief and
4 restitution to affected members of the general public as remedies for any violations of the UCL.

5 109. The Diversion Act, California Penal Code § 1001.60, *et seq.*, provides the exclusive
6 authorization for Bad Check Diversion Programs. Defendants’ Bad Check Restitution Program does
7 not comply with the requirements of the Act.

8 110. The Diversion Act only authorizes programs where a district attorney reviews
9 evidence and determines that there is probable cause to conclude that an individual has violated
10 Penal Code § 476a, by writing a check, knowing it would not clear and intending to defraud the
11 check payee. When a district attorney makes a probable cause determination, he or she is then
12 required to review five factors listed in Penal Code § 1001.62 and decide whether referral to a
13 diversion program is appropriate.

14 111. The Diversion Act authorizes only a \$50 administrative fee, and the returned check
15 fee actually charged by the check recipient’s bank, up to a maximum of \$15. No class fee may be
16 charged unless ordered by a court after a check writer has actually been charged and convicted for
17 intentionally writing a dishonored check. Cal. Penal Code § 1001.65(b).

18 112. Defendants routinely violate the FDCPA and fail to conform to the requirements and
19 limitations of the Diversion Act.

20 113. Cal. Bus. & Prof. C. § 6126 prohibits the unauthorized practice of law. The American
21 Bar Association has investigated the practice of private companies like Corrective Solutions sending
22 collection letters on the letterhead of prosecutors The ABA has determined that this conduct is
23 deceptive and that the companies that send these letters are engaged in the unauthorized practice of
24 law. (ABA Formal Ethics Opinion 469, Nov. 12, 2014, filed as Exhibit 10.) By sending letters on
25 the letterhead of the office of local district attorneys, Defendants are falsely holding themselves out
26 as a law office, despite the fact that they are not licensed to practice law, and are engaged in a
27 deceptive and unlawful practice.

28 114. Defendants’ collections practices are fraudulent because they are likely to deceive the
public. Defendants’ false assertion of official authority; incomplete description of “bad check”

1 criminal liability under California law; reference to nonexistent “criminal charges” having been
2 made; false threats of prosecution; demands for unlawful fees in order to avoid prosecution,
3 regardless of the facts of a particular case; and all the other false and misleading aspects of
4 Defendants’ collection scheme are likely to deceive the public.

5 115. The acts and practices complained of herein constitute unfair business practices
6 because these acts and practices are patently unfair, substantially injurious to the general public, and
7 offensive to public policy.

8 116. Plaintiff Kevin Vu has lost money or property as a result of Defendants’ multiple
9 violations of the UCL, including, but not limited to, the fees Defendants collected from him, and the
10 cost incurred by Plaintiff Vu in purchasing and mailing a money order to Defendants.

11 117. Plaintiffs are entitled under the UCL to enjoin these acts and practices and to obtain
12 restitution of all funds obtained by Defendants by reason of and through the use of these unlawful
13 and fraudulent acts and practices. Pursuant to the UCL, Plaintiff Vu, individually and on behalf of
14 all members of the general public who are, have been, or may be subjected to Defendants’ unlawful
15 and fraudulent business acts and practices are entitled to declaratory and preliminary and permanent
16 injunctive relief prohibiting such practices in the future, and other orders as may be necessary to
17 restore to any person in interest, any money or property, real or personal, which Defendants
18 acquired by means of such unlawful, unfair and fraudulent business practices.

19 118. In addition, Plaintiff Vu is entitled to recover reasonable attorneys’ fees, costs, and
20 expenses incurred in bringing this action under California Code of Civil Procedure § 1021.5.

21 **X. PRAYER FOR RELIEF**

22 For these reasons, Plaintiffs request that judgment be entered for them and for members of
23 the class, against the Defendants, for:

24 1. Declaratory relief that Defendants’ collection practices violate the FDCPA and the
25 UCL;

26 2. A preliminary and permanent injunction enjoining Defendants, their officers,
27 employees, agents, and all those acting in concert with them as follows:

28 (a) Prohibiting Defendants from participating in the collection of checks pursuant to
the Bad Check Diversion Act unless all requirements of the statute are met;

1 (b) Prohibiting Defendants from communicating with check writers without
2 disclosing in each communication that it is a debt collector, not a district attorney's office;

3 (c) Prohibiting Defendants from seeking to collect, or collecting, any unlawful fees,
4 including, but not limited to, class fees; and,

5 (d) Prohibiting defendants from making false representations in their
6 communications with check writers.

7 3. Certification of the proposed class and sub-class set forth in this Complaint.

8 4. Appointment of Plaintiff Vu as representative of the umbrella class.

9 5. Appointment of Plaintiffs Breazeale, Solberg, and Vu as representatives of the
10 FDCPA subclass.

11 6. Appointment of the undersigned counsel as counsel for the class and subclass.

12 7. Actual damages;

13 8. Restitution;

14 9. Statutory damages pursuant to 15 U.S.C. §1692k;

15 10. Costs and reasonable attorneys' fees;

16 11. Permit Plaintiffs leave to amend the Complaint to conform to the evidence presented
17 at trial.

18 12. Such other and further relief as the Court deems proper.

19
20 **DEMAND FOR TRIAL BY JURY**

21 Plaintiffs demand trial by jury under Rule 38(b) of the Federal Rules of Civil Procedure of
22 all issues triable of right by a jury.

1 RESPECTFULLY SUBMITTED AND DATED this 1st day of December, 2014.

2 TERRELL MARSHALL DAUDT
3 & WILLIE PLLC

4 By: /s/ Beth E. Terrell, CSB #178181

5 Beth E. Terrell, CSB #178181
6 Email: bterrell@tmdwlaw.com
7 936 North 34th Street, Suite 300
8 Seattle, Washington 98103-8869
9 Telephone: (206) 816-6603
10 Facsimile: (206) 350-3528

11 Paul Arons
12 Email: lopa@rockisland.com
13 LAW OFFICE OF PAUL ARONS
14 685 Spring Street, Suite 04
15 Friday Harbor, Washington 98250
16 Telephone: (360) 378-6496
17 Facsimile: (360) 378-6498

18 Deepak Gupta
19 Email: deepak@guptabeck.com
20 GUPTA BECK PLLC
21 1735 20th Street, NW
22 Washington, DC 20009
23 Telephone: (202) 888-1741
24 Facsimile: (202) 888-7792

25 *Attorneys for Plaintiffs*

— EXHIBIT 1 —

Start-up Packet Bad Check Restitution Program

Robert J. Maloney
District Attorney
Glenn County, CA

March 2013

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Corrective*Solutions*
Trust the Leader

START-UP PROGRAM

TABLE OF CONTENTS – PART 1

We are pleased to develop your Diversion Program.
Please complete the following and return to CorrectiveSolutions.
Thank you.

Step 1 - Approve & Sign

- Intake Criteria
- Crime Report
- Core Marketing Outreach Materials
 - Brochure
 - Merchant mailer postcard
- Sample Core Letter Series Part 1
 - Approval form
 - Letter Series Timing Sequence
 - Core Letters – Part 1
- Internet website

Step 2 – Provide

- Logo Request
- Photo Request
- Facsimile Signature Request
- Contact Information - Program Liaison
- Complete Check Writer & Merchant Hotline Recordings

Step 3 – Return Startup Binder

- Fax completed documents to:
Megan McClung at (866) 662-5541
- Mail originals to:
CorrectiveSolutions
Attn: Megan McClung
910 Calle Negocio Suite 300
San Clemente, CA 92673



CorrectiveSolutions
Trust the Leader

START-UP PROGRAM STEP 1 CHECKLIST

Step 1 - Approve & Sign

- Intake Criteria
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- Core Marketing Outreach Materials
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 - Merchant mailer postcard
- Sample Core Letter Series – Part 1
 - Approval form
 - Letter Series Timing Sequence
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- Internet website



Corrective*Solutions*
Trust the Leader

National Headquarters: 910 Calle Negocio Suite 300, San Clemente California 92673
800.325.3910 www.CorrectiveSolutions.org

Intake Criteria



Glenn County District Attorney Bad Check Restitution Program Probable Cause Determination/Intake Criteria

As the District Attorney of Glenn County, California, vested with the authority to establish a bad check pre-trial diversion Program (Program) and as per the Financial Services Regulatory Relief Act of 2006 (Act), the Administrative Support Services Agreement (Agreement), and applicable state and federal laws, I hereby authorize and direct the Program with this communication to follow certain criteria in the administration of the Program and in determining Program eligibility as outlined below:

Further, it is my determination that probable cause of a bad check violation shall be defined under California Penal Code § 476a and/or any other applicable statutes per my authority and discretion, as a check that has not been repaid after the victim has provided the check writer with reasonable notice of the dishonored check. Additional probable cause list here _____

This determination shall apply to each eligible check and be followed by the Program.

Initial here

Check eligibility criteria:

The following types of checks are eligible for the Program:

- Checks that remain unpaid after 10 days of the victim taking reasonable steps to provide notice to the check writer.

The following types of checks are ineligible for the Program:

- Fraud—lost/stolen/forged and identity theft
- Two-party checks—including payroll
- Checks not passed within this jurisdiction
- Credit card checks

In accordance with the Act, the following types of checks are also ineligible for the Program:

- Checks partially repaid to the victim
- Post dated checks; including payday loans or checks where the victim agreed to hold
- Stop payment checks where the issuer acted in good faith and with reasonable cause in stopping payment
- Checks issued by someone not competent or of legal age
- Checks dishonored due to bank error or failure to notify the check writer of bank adjustment
- Checks issued to pay an obligation arising from an illegal transaction

The following types of checks are excluded from the Program (as checked below, if any):

- Payments on account
- Real estate (residential and commercial) rentals or leases
- Equipment rentals or leases
- Other _____
- Other _____

The following are additional directives for Program and eligibility intake (as checked below, if any):

- Other: _____
- Other: _____
- Other: _____
- Other: _____

Check limits:

Checks are eligible for the Program up to \$ 5,000 .00.

Ineligible checks submitted to the Program will be returned to the victim, *upon their request*.

Probable Cause Determination:

CorrectiveSolutions will submit to the Communications Liaison Officer for review and approval of all checks for admittance into the Program on a daily or weekly basis.
(Circle one)

If no response within 48 or 72 hours we will open checks automatically and begin working them.
(Circle one)

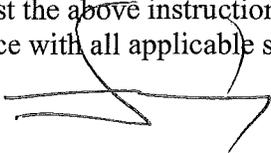
Please provide the contact information to whom will be assigned to this procedure.

Name: _____ Title: _____

Phone: _____ Email: _____

I hereby authorize and direct CorrectiveSolutions as the Program's administrator per the Agreement to contact all check writers with my approved letters and through other reasonable means of contact, including oral and written communication, to encourage compliance with the Program and confirm such checks meet the above definition of probable cause and are not clearly excluded by the criteria listed above (allowing for contact with check writers about certain checks that can only be determined ineligible after contact and upon receipt of relevant documentation).

I affirm and attest the above instructions are issued under my authority and direction as per the Agreement and in compliance with all applicable state and federal laws on this date March 13 2013.

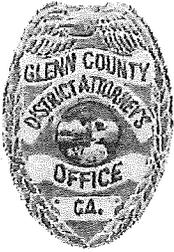


Signature _____
ROBERT J. MALONEY,
Glenn County District Attorney

Name

Title

Crime Report



BAD CHECK CRIME REPORT

GLENN COUNTY DISTRICT ATTORNEY

ROBERT J. MALONEY

Bad Check Program Address:
P.O. Box 1127
Willows, CA 95988-1127

Bad Check Program Contact:
(866) 398-0754 - Victim Hotline
(866) 398-5061 - Check Writer Hotline
(Please refer check writer to the "check writer" hotline)

For more information: www.checkprogram.com/glenncountycalifornia

Step 1
Confirm Eligibility

The following types of checks are ineligible for the program:

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

Step 2
Victim Information

Victim/Merchant Name: _____

Contact Name: _____ Title: _____

Victim Contact Information: Email: _____

(Required) Phone: () _____ Fax: () _____

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

Address: _____ City: _____ State: _____ Zip Code: _____

If assessed a bank charge(s) for the attached bad check(s) please state the amount of the bank charge per check

\$ _____ (Per California Penal Code 1001.65 (c) you are eligible to be reimbursed up to \$15 per check for assessed bank charges.)

Step 3
Check Writer Information

Check Writer's Name: _____

Address: _____ Apt: _____

City: _____ State: _____ Zip Code: _____

Home Phone: () _____ Other Phone: () _____

Driver's License # / Other ID #: _____

State: _____ Date of Birth: _____ / /

Other ID: (if applicable) _____

A "Courtesy Notice" must be sent to recover the bad check(s) in question to the check writer. If no attempt has been made, the check is not eligible for prosecution. (See sample courtesy notice on back.)

Step 4
Check Information

Ck. No.	Date Passed	\$ Amount	Name of person accepting check <i>(if no longer employed please list manager)</i>	Can person ID check writer?
_____	_____	_____	_____	<input type="checkbox"/> Yes <input type="checkbox"/> No
_____	_____	_____	_____	<input type="checkbox"/> Yes <input type="checkbox"/> No
_____	_____	_____	_____	<input type="checkbox"/> Yes <input type="checkbox"/> No

Address where check was accepted (if different than Step 2): _____ (Required)

City: _____ State: _____ Zip Code: _____

Step 5
Victim Confirmation

- I will not accept direct payment from the check writer after filing this report with the Program. Please refer check writer to (866) 398-5061.
- I understand that the check writer has the option to dispute this claim in writing with the Bad Check Program.
- If this crime report is not completely filled out it may prevent or delay this case from moving forward for prosecution review.
- I attest that I have sent courtesy notice to the check writer and after 10 days it remains unpaid.
- I have reviewed the filing instructions, I hereby affirm and attest under penalty of perjury, that all information provided on this crime report is true to the best of my knowledge.

X _____

Signature of Person Filing (Required) Print Name of Person Filing Date Filed

Additional crime reports are available at: www.checkprogram.com/glenncountycalifornia

Staple original or bank-generated substitute check here

For additional information and crime reports: www.checkprogram.com/glenncountyca

Sample "Courtesy Notice"

Date

Dear Check Writer:

You are hereby notified that a check numbered _____ in the face amount of \$ _____, issued by you on _____ drawn upon _____ bank, and payable to _____, has been dishonored. You have 10 days from receipt of this notice to tender payment of the full amount of such check plus a bank charge of \$ _____, the total amount due being \$ _____.

Unless this amount is paid in full within the time specified above, we may turn over the dishonored check and all other available information relative to this incident to the District Attorney's Office for potential criminal prosecution.

Closing,

Your name/address

Bad Check Program Information

As a victim of a bad check you may file this report with the Glenn County District Attorney, provided there is sufficient information, and that the check meets all eligibility guidelines. The Glenn County District Attorney's Office will seek full restitution for victims whenever possible; however, please keep in mind that the Bad Check Restitution Program can make no recovery guarantees. By submitting the check to the program you surrender control of the check to criminal process and forego the opportunity to pursue civil debt collections.

Check writers are encouraged to make payments in full. Should a partial payment be received, the payment will be allocated between the victim and the Bad Check Program. "Restitution" refers to the face value of all checks listed on this report along with all "stated" bank charges assessed by your bank.

A check will be deemed ineligible and returned to you to pursue a civil remedy, if a filed check is later determined to be:

- A stop payment check where the issuer acted in good faith and with reasonable cause in stopping payment,
- A check issued by someone not competent or of legal age,
- A check dishonored due to bank error or failure to notify the check writer of bank adjustment of a check,
- A check issued to pay an obligation arising from an illegal transaction.

What to do after my crime report is filed with the Program

- Please **do not** accept direct payments from check writers. Should the check writer contact you to make payment, refer them to the Check Writer Hotline at (866) 398-5061.
- You may contact Victim Services for case updates at (866) 398-0754 anytime.
- Please allow a minimum of 90 days to pursue restitution.
- If the check writer does not comply with the Program, the case may be reviewed for possible criminal prosecution.
- If we are unable to recover restitution and/or the check is not "eligible" for prosecution, you may request the check(s) be returned to pursue a civil remedy.

Filing Instructions

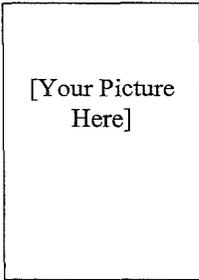
1. Fill out Crime Report completely or go to www.checkprogram.com/merchants for electronic filing (requires scanner).
2. Attach originals or legal copies of all checks (including front and back of checks) and all supporting documents such as CERTIFIED MAIL RETURN RECEIPT OR UNDELIVERED LETTER, COPY OF "COURTESY NOTICE," "RETURN ITEM" NOTICE FROM THE BANK (WITH FEES).
3. Mail Bad Check Crime Report and all other correspondence to:

Glenn County Bad Check Restitution Program
P.O. Box 1127, Willows, CA 95988-1127
4. Once a report has been filed: ALL restitution payments must be coordinated by the District Attorney's Office. Should the check writer contact you to make payment, direct them to the Bad Check Restitution Program at (866) 398-5061.
DO NOT ACCEPT PAYMENT DIRECTLY FROM CHECKWRITER.

Core Marketing Materials

1. Program Brochure
2. Merchant mailer postcard

A Message from Robert J. Maloney, District Attorney



As your District Attorney, I'm always concerned about the negative impact of bad checks passed to local businesses. Thousands of dollars are lost every year by merchants as a result of this ongoing problem. Bad checks affect everyone in terms of higher consumer costs

that must be passed on to offset losses, and increased taxes to cover the additional costs for law enforcement and prosecution.

In an effort to combat this problem, I have organized the Bad Check Restitution Program to assist local merchants with bad check losses. The primary goal of the program is to obtain full restitution for the victim without adding to the financial burden of the criminal justice system.

First-time bad check offenders are given the opportunity to avoid criminal prosecution by attending a mandatory intervention class, in addition to paying restitution. All of this is accomplished without any cost to the taxpayers.

Your interest and participation in this special program will benefit all law-abiding citizens and help your business improve its bottom line!

Sincerely,

[Your Signature Here] - Optional

Robert J. Maloney
Glenn County District Attorney

Glenn County District Attorney Bad Check Restitution Program

The program works because...

- Bad check reports are easy to file, and follow-up action is prompt.
- Upon recovery, 100% of the face value of the check is returned to the victim.
- There is no minimum dollar restriction on a bad check.
- Offenders must complete an educational class at their expense.
- The program operates at no cost to the county or taxpayers.

Glenn County District Attorney
Bad Check Restitution Program
P.O. Box 1127
Willows, CA 95988-1127
(postal address only)

Questions or have a check to file?

Go to
www.checkprogram.com/glenncountyca

or call
1-866-398-0754

Brochure not printed at taxpayer expense.

“Don't be a Victim of Bad Checks!”

Robert J. Maloney
District Attorney



Bad Check Restitution Program

Approved by (no changes): _____ Date: 3/13/14
 Approved with changes: _____ Date: _____



The Office of the District Attorney
Glenn County, CA

Check Acceptance Tips:

- Institute a check acceptance policy. A clearly posted policy for your employees and customers can reduce your losses.
- Accept checks written only with today's date. Post-dated checks are civil matters and are not accepted in the Glenn County District Attorney Bad Check Restitution Program.
- Trust your instincts! If something doesn't seem right, ask questions or ask for another form of payment. You are not obligated to accept a check.

John and Jane Doe
123 Fair Lane
Smalltown, ST 12345

123-444-5555

100

05/11/2011
Date

Pay Friendly Business \$ 100.00

to the order of One Hundred and 00/100 Dollars

* BANK

Memo Signature

1234567891234 100

Check Screening Tips

1. Make sure that the address is a street address, not just a P.O. Box number. Write down the street address if there is only a P.O. Box address provided.
2. Ask for and write down a phone number. If the phone number is provided on the check, verify that it is correct.
3. Note the check's date. Post dated checks are not acceptable.
4. Be wary of new accounts with low check numbers.
5. Make sure that the written and figure amounts match.
6. Observe the writer's signature and make sure the signature matches the one on the I.D.

Glenn County District Attorney Bad Check Restitution Program

A check is ELIGIBLE for this program if:

- The amount is no more than \$5,000.00 (or multiple checks do not exceed this limit). There are no minimum dollar restrictions.
- The check was received in Glenn County deposited in a bank in exchange for goods or services and was presumed "good" at the time of acceptance.
- A "Courtesy Notice" was sent to check writer allowing 10 days to make check good.
- A photo I.D. number (driver's license or state identification card) was recorded at the time of transaction.

A check is INELIGIBLE if:

- It is post-dated.
- Both parties knew there were insufficient funds at the time of transaction.
- It is a two-party, stop payment, or payroll check.
- The identity of the check writer is unknown.
- There is no amount, date, or signature on the check.
- The numeric and written amounts on check do not match.
- The check has not been processed by a bank.

Checks ineligible for the Glenn County District Attorney Bad Check Restitution Program may be pursued through Small Claims Court process or by a private collection agency.

The Program, Step-by-Step

1. Make personal contact with the check writer. If you are unsuccessful, send a courtesy notice. The check writer has 10 days to respond and remit payment.
2. If you do not hear from the check writer or receive payment, contact the Bad Check Restitution Program at 1-866-398-0754 or visit our website for a crime report at www.checkprogram.com/glenncountyca.
3. Fill out the crime report, keep copies and attach originals or legal copies of all checks and notification documents, such as return receipts and bank notices, and mail to the address below.
4. If you do not receive restitution within 90 days, contact the Glenn County District Attorney Bad Check Restitution Program.

Glenn County District Attorney
Bad Check Restitution Program
P.O. Box 1127
Willows, CA 95988-1127
(postal address only)

Questions or have a check to file?

Go to
www.checkprogram.com/glenncountyca

or call
1-866-398-0754

Bad Check Writers Beware!

Check Writers,

Should you knowingly write a bad check, or otherwise defraud this business, you may be prosecuted in Glenn County pursuant to California Penal Code § 476a.

This business reports bad checks to the Glenn County District Attorney's Bad Check Program.

As your District Attorney, it is my job to keep our community safe from crime.

Thank you,



Robert J. Maloney
District Attorney
Glenn County

[Your Picture
Here]



Sample Core Letter Series Part 1



Glenn County District Attorney Bad Check Restitution Program Letter Series Approval – Part 1

As the District Attorney of Glenn County, California, vested with the authority to establish a bad check pre-trial diversion program (Program) and as per the Financial Services Regulatory Relief Act of 2006 (Act), and the Administrative Support Services Agreement (Agreement) and applicable state and federal laws, I hereby authorize and direct the Program with this communication:

Approved With No Changes. I have reviewed the letter series that is attached and approved timing schedule for Program use in my jurisdiction as so specified. I have made no changes to the letters or timing schedule.

Signature: _____ Date: 3/13/13
ROBERT J. MALONEY

Title: GLENN COUNTY DISTRICT ATTORNEY

Approved With Changes. I have reviewed the letter series and approved timing schedule for Program use in my jurisdiction as so specified per my changes. I have amended the letters / timing schedule and my changes are initialed.

Signature: _____ Date: _____

Title: _____

NOTE: Minor changes may be made from time to time for administrative efficiencies.
Any future changes of consequence will be brought to your attention for approval.

Core Student Demand Letters Timing Schedule

	<u>Purpose</u>	<u>When Sent</u>	<u>Call to Action</u>
FirstNotc	Official Notice	Upon receipt of Crime Report	10 days to respond
FirstFTC	Notice of Failure to Comply	15 days after FirstNotc if no response	10 days to respond
SecondFTC	Warning— Second Notice of Failure to Comply	30 days after FirstFTC if no response	7 days to respond
ThirdFTC	Warning— Third Notice of Failure to Comply	30 days after SecondFTC if no response	2 business days to respond
FTCNoRsp4	Final Warning— Immediate Attention Required	30 days after ThirdFTC if no response	1 business day to respond



Calaveras County District Attorney
Bad Check Restitution Program
PO Box 1480
San Andreas, CA 95249-1480

Barbara M. Yook
District Attorney



01

OFFICIAL NOTICE - IMMEDIATE ATTENTION REQUIRED

*** 0217DUP.WHT.004
3000000001 01.0000.0000 1/1



JOHN Q PUBLIC
PO BOX 12345
BOSTON CA 02120

Office Hours: 9:00 a.m. - 5:00 p.m.

Phone: (866)740-7234

Date of Notice: 02/17/2012

Case #: 39156591

Balance Due: \$288.63

Page: 1

You have been accused of violating California Penal Code 476a, entitled "Making or Delivering Check With Insufficient Funds". A conviction under this statute is punishable by up to one (1) year in the county jail. See page 5 for details on the party(s) initiating this allegation.

My office has established a Bad Check Restitution Program. The Bad Check Restitution Program is authorized by the California legislature, and is a pre-charge program designed to allow people accused of having violated the above-referenced statute to avoid the possibility of further action against the accused by the District Attorney's Office. Participation in the Bad Check Restitution Program is voluntary. The Bad Check Restitution Program has two steps:

1. Pay all restitution on all reported checks, plus any administrative, returned item, and program fees.
2. Attend a Financial Accountability class.

Calaveras County District Attorney Bad Check Restitution Program

TOTAL BALANCE DUE: \$288.63

You have the right to dispute this matter, as set forth on page 2 of this notice. In order to participate in the Bad Check Restitution Program you must pay in full and schedule class within THIRTY (30) DAYS from the date of this Notice.

PLEASE CALL (866)740-7234 or visit www.checkprogram.com
TO MAKE PAYMENT/SCHEDULE CLASS

Please have your case number ready: 39156591 and Password: 99999999

PAYMENTS ACCEPTED: CREDIT & DEBIT CARDS, WESTERN UNION, MONEY ORDERS, OR CASHIER'S CHECK

If you choose to participate in the Bad Check Restitution Program, and if you successfully complete the program's two steps above, my office will consider this matter resolved. The Bad Check Restitution Program is administered by a private entity under contract with the Calaveras County District Attorney.

For additional information or if you believe you received this Notice in error, please see the reverse side.

Sincerely,

Barbara M. Yook
District Attorney

See reverse side →

This notice has been printed and mailed on behalf of my office by a third party administrator of the Bad Check Restitution Program at no cost to the taxpayer.

■ **IF YOU BELIEVE YOU RECEIVED THIS NOTICE IN ERROR OR WISH TO DISPUTE THIS NOTICE IN WRITING:**

- Review your records CAREFULLY.
- Call the District Attorney's Bad Check Restitution Program Office at (866)740-7234.
- Ask for a Compliance Specialist.
- Explain the error.
- The Compliance Specialist will ask you to fax or mail in documentation of the error. For cases involving stop payments on checks or performance disputes, please consult a Compliance Specialist for more information.
- You may dispute the validity of this allegation in writing to this Office within 30 days of receiving this Official Notice. Upon submitting your written dispute not later than 30 days after receiving the Official Notice (along with any relevant supporting documentation), the authorized administrator of the Bad Check Restitution Program will review the written dispute based on criteria established by the Calaveras County District Attorney.
- Fax or mail your case documentation to: **Fax: (800) 227-3041**

**Calaveras County District Attorney
Bad Check Restitution Program
PO Box 1480
San Andreas, CA 95249-1480**

■ **IF YOU BELIEVE YOU RECEIVED THIS NOTICE AS A RESULT OF IDENTITY THEFT, FORGERY, THEFT, OR OTHER FRAUD:**

You will be required to promptly provide further written documentation to support your claim. If you are a victim of identity theft, you will need to go to the bank to obtain and sign an identity theft affidavit. If you were not the victim of identity theft but did not write the check(s), you will need to go to the bank to obtain and sign an affidavit of forgery that you did not write the check(s) in question. In most cases, if you believe the check(s) were stolen or forged, you will also be required to file a police report.

■ **IF YOU BELIEVE YOU WERE NOT PROPERLY NOTIFIED:**

The Bad Check Restitution Program is only for reports of bad check activity from those businesses or parties that have notified you according to California State Law and provided you with an opportunity to make good on the check. In addition to notification from the party you issued the check to banks routinely send customers notice of returned items. Non-sufficient funds (NSF) checks also appear on your monthly account statement. **PLEASE CHECK YOUR RECORDS CAREFULLY.**

■ **IF YOU HAVE ALREADY PAID THE MERCHANT OR FILING PARTY:**

Please fax or mail documentation that the merchant or filing party received payment BEFORE the date of this Notice. Appropriate documentation consists of a receipt of payment to the victim and/or a cleared copy (front and back) of repayment to the victim. The administrator of the Bad Check Restitution Program will review the submitted documentation. Allow fourteen (14) days to process information before calling.

■ **IF YOU WANT TO CONTEST THIS MATTER:**

You have the right to choose not to participate, and to contest this matter. If you wish, you may want to consult an attorney. Personal bankruptcies DO NOT void responsibility in a criminal matter.

To Make Payment/Schedule Class, Call (866)740-7234 or www.checkprogram.com

Case Number: 39156591 Password: 99999999

PAYMENTS ACCEPTED: CREDIT & DEBIT CARDS, WESTERN UNION, MONEY ORDERS, OR CASHIER'S CHECK

DISPUTES, TERMS AND CONDITIONS, AND OTHER IMPORTANT INFORMATION

Page: 3

■ TERMS AND CONDITIONS OF THE BAD CHECK RESTITUTION PROGRAM:

Participant agrees to participate in the Calaveras County District Attorney Bad Check Restitution Program ("Program"). Participant acknowledges and agrees that the fees charged for the Program are reasonable and appropriate. Participant acknowledges and agrees that in addition to the fees that are charged, participant is required to attend a rehabilitative counseling class conducted by an instructor hired by the private entity under contract with the District Attorney to administer the Program ("Administrator"). Participant further agrees that by paying the fees charged for the Program, participant is bound by the terms and conditions of the Program, as set forth in this agreement.

Agreement to Arbitrate: You and Administrator agree to resolve any and all claims and disputes relating in any way to the Program ("Claims"), except for Claims concerning the validity, scope or enforceability of this Arbitration Agreement, through BINDING INDIVIDUAL ARBITRATION before the American Arbitration Association ("AAA"). This means you will be unable to have Claim(s) resolved by a court or jury, or to participate in a class action or class arbitration. Other rights you would have if you went to court may be unavailable or limited in arbitration, including your right to appeal. The only exception to this agreement to arbitrate is that you and/or Administrator may seek relief in a small claims court for Claims within the jurisdiction of that court in any particular state.

CLASS ACTION WAIVER: NO ARBITRATOR OR COURT MAY ORDER, PERMIT OR CERTIFY A CLASS ACTION, REPRESENTATIVE ACTION, PRIVATE ATTORNEY-GENERAL ACTION OR CONSOLIDATED ARBITRATION IN CONNECTION WITH THIS ARBITRATION AGREEMENT. NO ARBITRATOR OR COURT MAY ORDER OR PERMIT A JOINDER OF PARTIES IN CONNECTION WITH THIS ARBITRATION AGREEMENT UNLESS ALL PARTIES CONSENT TO SUCH JOINDER IN WRITING.

Governing Law and Jurisdiction: Any arbitration proceeding will be governed by the Consumer Procedures or other applicable rules of AAA in effect when the Claim is filed. The arbitration proceeding will take place in the county where you reside or any other mutually acceptable location. Judgment on the arbitration award may be entered in any court having jurisdiction.

The arbitrator shall follow applicable law and is empowered to grant any relief, including attorneys' fees, costs, and other expenses, to the extent such relief would be available in court. You and Administrator agree the Program and transactions subject to this Arbitration Agreement involve interstate commerce and that this Arbitration Agreement is governed by and enforceable under the Federal Arbitration Act. You and Administrator also agree this Arbitration Agreement extends to parties related to Administrator that are involved in any Claims, including without limitation, Administrator's parents, affiliates, subsidiaries, agents, principals, contractors, officers and employees.

Costs: Administrator shall pay all arbitration costs if it initiates arbitration. If you initiate arbitration, you will not be required to pay any fees that exceed the fees you would have paid had you brought the Claim(s) in court. You may seek a waiver of the filing fee under AAA Rules. If you do not qualify for a waiver, you may request, in writing, that Administrator advance all or part of the filing fee.

Enforceability: This Arbitration Agreement shall govern if there is a conflict between it and the AAA Rules, unless Administrator waives any conflict in writing. If any part of this Arbitration Agreement, except the class action waiver, is found invalid or unenforceable, the remaining provisions shall remain in full force and effect. If the class action waiver is found invalid or unenforceable as to a particular Claim, the Arbitration Agreement shall not apply to that Claim.

You may contact AAA to obtain information about arbitration, arbitration procedures and fees by calling 800-778-7879 or visiting www.adr.org.

YOU HAVE THE RIGHT TO REJECT THIS ARBITRATION AGREEMENT, BUT YOU MUST DO SO PROMPTLY. If you do not agree to arbitration, you must notify us in writing within sixty (60) days after the date you enroll in the Program. You must send your notice to: 806 E Avenida Pico STE 1 PMB 340, San Clemente, CA 92673-5639, and include your full name, address, and the statement "I reject the arbitration agreement for the Calaveras County District Attorney Bad Check Restitution Program."

■ OTHER IMPORTANT INFORMATION:

Completion of the Bad Check Restitution Program is valid ONLY if you comply with ALL District Attorney's requirements. Should you be permitted to comply by a payment plan, such payments may be allocated ratably between restitution and program fees until they are fully satisfied. By making full or partial payment, you are agreeing to be enrolled in the Bad Check Restitution Program, and you are agreeing to pay restitution on all reported checks as well as pay all required fees, including program, administrative, and returned item fees pursuant to the terms of this Notice. Once enrolled, program fees will be non-refundable.

You may wish to consult an attorney to obtain legal advice about your rights in regards to this matter.

The Program does not accept personal checks. Sending a personal check for payment shall be deemed sufficient authorization to complete the payment via electronic debit. By doing so, your checking account will be debited for the amount of the check and your cancelled check will not be returned to your bank. Electronic debit entries returned for insufficient or uncollected funds may be resubmitted two times following the return of the original entry.

Please note, your balance may increase if additional checks are reported to this office or program fees are changed. Additionally, you may incur a fee for missing or rescheduling class, making a late or insufficient payment, and/or paying over the phone or Internet.



Calaveras County District Attorney
Bad Check Restitution Program
 PO Box 1480
 San Andreas, CA 95249-1480

Barbara M. Yook
 District Attorney

OFFICIAL NOTICE - IMMEDIATE ATTENTION REQUIRED

BALANCE DUE ON 03/07/2012

\$288.63

Office Hours: 9:00 a.m. - 5:00 p.m.
 Page: 5 of 5

PAYMENT OPTIONS:

- 1. INTERNET** www.checkprogram.com
 Case Number: 39156591
 Password: 99999999
Credit and Debit Cards

- 2. PHONE** (866)740-7234
Credit and Debit Cards or Western Union

- 3. MAIL** **Calaveras County District Attorney**
Bad Check Restitution Program
 PO Box 1480
 San Andreas, CA 95249-1480
Money Orders and Cashier's Checks Only

<u>VICTIM</u>	<u>CHECK #</u>	<u>DATE</u>	<u>AMOUNT</u>	<u>RETURNED ITEM FEE</u>	<u>ADMIN FEE</u>	<u>TOTAL THIS CHECK</u>
MARY'S FLOWER SHOPPE	4530	10/29/2011	\$67.38	\$1.25	\$50.00	\$118.63
Financial Accountability Class Fee						\$170.00
TOTAL BALANCE DUE:						\$288.63

*** Additional service fee may be due victim. ***

To Make Payment/Schedule Class, Call (866)740-7234 or www.checkprogram.com
Case Number: 39156591 Password: 99999999
PAYMENTS ACCEPTED: CREDIT & DEBIT CARDS, WESTERN UNION, MONEY ORDERS, OR CASHIER'S CHECK



Calaveras County District Attorney
Bad Check Restitution Program
PO Box 1480
San Andreas, CA 95249-1480

Barbara M. Yook
District Attorney



02

FAILURE TO RESPOND - IMMEDIATE ATTENTION REQUIRED

*** 0217REG.WHT.004
3000000001 01.0000.0000 1/1



JOHN Q PUBLIC
PO BOX 12345
HEMET CA 92545

Office Hours: 9:00 a.m. - 5:00 p.m.
Phone: (866)740-7234
Date of Notice: 02/17/2012
Case #: 39156591
Balance Due: \$288.63
Page: 1

Our records indicate that you have failed to respond or fully comply with the District Attorney's Official Notice.

Call this Office by 02/27/2012 if you wish to participate in the Bad Check Restitution Program.

Successful completion of the program requires that you comply with all Bad Check Restitution Program requirements including full restitution, all fees and attendance of the Financial Accountability class. You may receive further notices and/or phone calls while program requirements remain outstanding.

Our records indicate that you currently have an outstanding balance of \$288.63.

You are scheduled to attend the Financial Accountability class on ??? .

If you fail to cancel your scheduled class without 48 hours notice or cancel subsequent classes, you may be required to pay \$25.00 rescheduling fee for each occurrence. Successful completion of the program requires that you comply with all Bad Check Restitution Program requirements including full payment of restitution and all program fees and attendance of the Financial Accountability class. You may receive further notices and/or phone calls while program requirements remain outstanding.

If you have already mailed or arranged your required payment(s) and completed or scheduled the educational class, please disregard this Notice. Otherwise, please call (866)740-7234 or go to our secure website at www.checkprogram.com. To access your file online you will need to enter your case number, which is 999999, and the following password: 999999.

Thank you for your immediate attention to this matter.

To Make Payment/Schedule Class, call (866)740-7234 or www.checkprogram.com

Case Number: 99999999 Password: 99999999

PAYMENTS ACCEPTED: CREDIT & DEBIT CARDS, WESTERN UNION, MONEY ORDERS, OR CASHIER'S CHECK



Calaveras County District Attorney
Bad Check Restitution Program
PO Box 1480
San Andreas, CA 95249-1480

Barbara M. Yook
District Attorney



03

WARNING - SECOND NOTICE OF FAILURE TO COMPLY

*** 0217REG.WHT.004
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JOHN Q PUBLIC
PO BOX 12345
PALM SPRINGS CA 92264

Office Hours: 9:00 a.m. - 5:00 p.m.
Phone: (866)740-7234
Date of Notice: 02/17/2012
Case #: 39156591
Balance Due: \$288.63
Page: 1

You have failed to respond to the District Attorney's Notices regarding California Penal Code 476a, entitled "Making or Delivering Check With Insufficient Funds". Prior attempts to resolve this situation have been unsuccessful.

You cannot participate in the Bad Check Restitution Program unless you contact this office prior to 02/24/2012. If you wish to participate in the program, call this Office during the hours listed above.

Successful completion of the program requires that you comply with all Bad Check Restitution Program requirements including full restitution, all fees and attendance of the Financial Accountability class. You may receive further notices and/or phone calls while program requirements remain outstanding.

Our records indicate that you currently have an outstanding balance of \$288.63.

You are scheduled to attend the Financial Accountability class on ??? .

If you fail to cancel your scheduled class without 48 hours notice or cancel subsequent classes, you may be required to pay \$25.00 rescheduling fee for each occurrence. Successful completion of the program requires that you comply with all Bad Check Restitution Program requirements including full payment of restitution and all program fees and attendance of the Financial Accountability class. You may receive further notices and/or phone calls while program requirements remain outstanding.

If you have already mailed or arranged your required payment(s) and completed or scheduled the educational class, please disregard this Notice. Otherwise, please call (866)740-7234 or go to our secure website at www.checkprogram.com. To access your file online you will need to enter your case number, which is 999999, and the following password: 999999.

Thank you for your immediate attention to this matter.

To Make Payment/Schedule Class, call (866)740-7234 or www.checkprogram.com

Case Number: 99999999 Password: 99999999

PAYMENTS ACCEPTED: CREDIT & DEBIT CARDS, WESTERN UNION, MONEY ORDERS, OR CASHIER'S CHECK



Calaveras County District Attorney
Bad Check Restitution Program
PO Box 1480
San Andreas, CA 95249-1480

Barbara M. Yook
District Attorney



04

WARNING - THIRD NOTICE OF FAILURE TO COMPLY

*** 0217REG.WHT.004
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JOHN Q PUBLIC
PO BOX 12345
MORENO VALLEY CA 92553

Office Hours: 9:00 a.m. - 5:00 p.m.
Phone: (866)740-7234
Date of Notice: 02/17/2012
Case #: 39156591
Balance Due: \$288.63
Page: 1

Our records indicate you have failed to respond to previous Notices regarding California Penal Code 476a, entitled "Making or Delivering Check With Insufficient Funds".

Call this Office within TWO (2) business days of receiving this letter if you wish to participate in the Bad Check Restitution Program.

Our records indicate that you currently have an outstanding balance of \$288.63.

You are scheduled to attend the Financial Accountability class on ??? .

If you fail to cancel your scheduled class without 48 hours notice or cancel subsequent classes, you may be required to pay \$25.00 rescheduling fee for each occurrence. Successful completion of the program requires that you comply with all Bad Check Restitution Program requirements including full payment of restitution and all program fees and attendance of the Financial Accountability class. You may receive further notices and/or phone calls while program requirements remain outstanding.

Successful completion of the program requires that you comply with all Bad Check Restitution Program requirements including full restitution, all fees and attendance of the Financial Accountability class. You may receive further notices and/or phone calls while program requirements remain outstanding.

If you have already mailed or arranged your required payment(s) and completed or scheduled the educational class, please disregard this Notice. Otherwise, please call (866)740-7234 or go to our secure website at www.checkprogram.com. To access your file online you will need to enter your case number, which is 999999, and the following password: 999999.

Sincerely,

Barbara M. Yook
District Attorney

The Calaveras County District Attorney's Bad Check Restitution Program is administered by a private entity under contract with the Calaveras County District Attorney.

To Make Payment/Schedule Class, call (866)740-7234 or www.checkprogram.com

Case Number: 99999999 Password: 99999999

PAYMENTS ACCEPTED: CREDIT & DEBIT CARDS, WESTERN UNION, MONEY ORDERS, OR CASHIER'S CHECK



Calaveras County District Attorney
Bad Check Restitution Program
PO Box 1480
San Andreas, CA 95249-1480

Barbara M. Yook
District Attorney



05

FINAL WARNING - IMMEDIATE ATTENTION REQUIRED

*** 0217REG.WHT.004
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JOHN Q PUBLIC
PO BOX 12345
VALLEY VILLAGE CA 91607

Office Hours: 9:00 a.m. - 5:00 p.m.
Phone: (866)740-7234
Date of Notice: 02/17/2012
Case #: 39156591
Balance Due: \$288.63
Page: 1

Due to your failure to complete the requirements specified in previous Notices, you are about to lose eligibility to participate in the Bad Check Restitution Program to resolve the allegation that you have violated California Penal Code 476a, entitled "Making or Delivering Check With Insufficient Funds".

If you wish to participate in the Bad Check Restitution Program, contact this Office the FIRST business day after receipt of this letter.

Our records indicate that you currently have an outstanding balance of \$288.63.

You are scheduled to attend the Financial Accountability class on ??? .

If you fail to cancel your scheduled class without 48 hours notice or cancel subsequent classes, you may be required to pay \$25.00 rescheduling fee for each occurrence. Successful completion of the program requires that you comply with all Bad Check Restitution Program requirements including full payment of restitution and all program fees and attendance of the Financial Accountability class. You may receive further notices and/or phone calls while program requirements remain outstanding.

Successful completion of the program requires that you comply with all Bad Check Restitution Program requirements including full restitution, all fees and attendance of the Financial Accountability class.

If you have already mailed or arranged your required payment(s) and completed or scheduled the educational class, please disregard this Notice. Otherwise, please call (866)740-7234 or go to our secure website at www.checkprogram.com. To access your file online you will need to enter your case number, which is 999999, and the following password: 999999.

Thank you for your immediate attention to this matter.

To Make Payment/Schedule Class, call (866)740-7234 or www.checkprogram.com

Case Number: 99999999 Password: 99999999

PAYMENTS ACCEPTED: CREDIT & DEBIT CARDS, WESTERN UNION, MONEY ORDERS, OR CASHIER'S CHECK

Bad Check Restitution Program Internet Web Page

CorrectiveSolutions hosts personalized internet web pages for your program. As always, there is no charge for this service.

To see a sample of how your web page could look, direct your web browser to www.checkprogram.com/glenncountyca

If you would like us to proceed with the publication of your web page simply initial this letter below. If you have questions or comments please call (800) 325-3910, extension 139 or email mmcclung@correctivesolutions.org

Current web site address

Web Master Contact Name and Number

Approved by (no changes): _____ Date: 3/13/13

Approved with changes: _____ Date: _____

START-UP PROGRAM STEP 2 CHECKLIST

Step 2 – Provide

- Logo Request
- Photo Request
- Facsimile Signature Request
- Contact Information - Program Liaison
- Complete Check Writer & Merchant Hotline Recordings



Corrective*Solutions*
Trust the Leader

National Headquarters: 910 Calle Negocio Suite 300, San Clemente California 92673
800.325.3910 www.CorrectiveSolutions.org



Corrective Solutions
Trust the Leader

Logo Request

Please place your county logo below.
(If your logo is different than what we have on file.)



Options

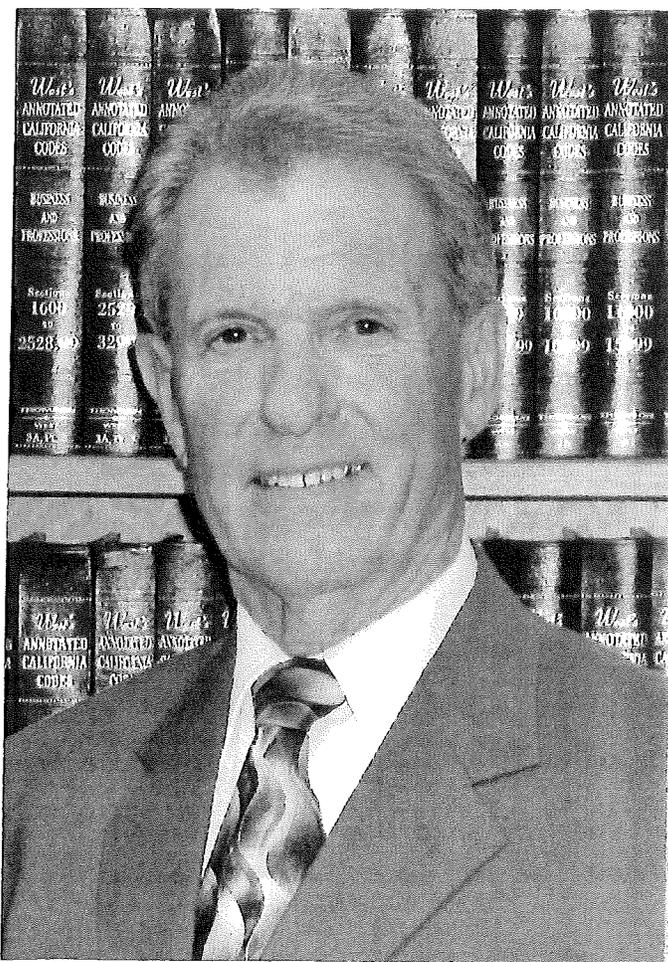
- Digital send as **(tif or jpeg)** file via email to mmcclung@correctivesolutions.org
- Original logo from letterhead



Corrective Solutions
Trust the Leader

Prosecutor's Photograph

Please place a copy of the Prosecutor's photograph here



Options

Digital send as (tif or jpeg) file via email to mmclung@correctivesolutions.org

Original Photo

1.) Scanned

2.) Scanned and returned to _____



Corrective*Solutions*
Trust the Leader

Facsimile Signature Request

**Please have the person whose name you wish to appear on the
Official Notice Letter sign in the center of the box below.**

DOES NOT WISH ACTUAL
SIGNATURE TO BE USED
ON CORRESPONDENCE

ROBERT J. MALONEY

Print Name

GLENN COUNTY DISTRICT ATTORNEY

Print Title



Corrective Solutions
Trust the Leader

Email Contact Request

Please provide email address below for monthly statistical reports

Name: ROBERT J. MALONEY Title: DISTRICT ATTORNEY

Email: rmaloney@countyofglenn.net

Additional Contact: KATHY CAVIGLIA Title: ADMINISTRATIVE ASSISTANT

Email: kcaviglia@countyglenn.net

Additional Contact: HANNAH BARLETTA Title: PUBLIC SERVICE EMPLOYEE III

Email: hbarletta@countyofglenn.net

Additional Contact: _____ Title: _____

Email: _____

Options

- Send via U.S. Mail only
- Send via e-mail only
- Send via email and U.S. Mail

Victim Service & Check Writer Recording Messages (OPTIONAL)



Directions:

Call the Prosecutor Recording Center at 877.279.0986

After the brief welcome message and beep, please record the message for the Compliance Services (you may use the script provided below)

Call the Prosecutor Recording Center again at 877.279.0986

Record the message for Victim Services (you may use the script provided below)

Compliance Services: 40 seconds

You have reached the Glenn County District Attorney's Bad Check Restitution Program.

I am _____, your District Attorney.

I have personally designed this diversion program to assist you in resolving your bad check case today.

Successful completion of this program is very important.

It will help you avoid the risk of criminal prosecution which may include: a criminal record, fines, court fees, and even jail.

The program requires two steps:

First: Pay all restitution and program fees in full

Second: Attend a local financial accountability seminar

I urge you to take advantage of this opportunity; please stay on the line and one of my authorized case coordinators will help you resolve this matter today.

We will announce the Spanish assistance and website separately.

Victim Services: 45 seconds

You have reached the Glenn County District Attorney's Bad Check Restitution Program.

I am _____, your District Attorney.

I have personally designed this no-cost program to help you recover restitution on bad checks.

This program is utilized by thousands of local merchants. It really works. Thank you for the chance to serve you.

While we endeavor to recover on all bad checks, and are generally very successful, some cases are unable to be resolved.

I want to assure you my staff is using every tax dollar wisely in an effort to enforce the law in our community.

Naturally, due to varying case loads of other more serious crimes, we are unable from time to time to prosecute all eligible cases.

I appreciate your participation and support in making our community better.

Please stay on the line and one of my authorized agents will be with you shortly.

We will announce the website separately.

START-UP PROGRAM

TABLE OF CONTENTS – PART 2

We are pleased to develop your Diversion Program.
Please complete the following and return to CorrectiveSolutions.
Thank you.

Step 1 - Approve & Sign

- Dispute Resolution Criteria
- Prosecution Review Criteria
- Remaining Letter Series – Part 2
 - Approval form
 - Letter Series Timing Sequence
 - Remaining Letter Series – Part 2

Step 2 – Return

- Fax completed documents to:
Megan McClung at (866) 662-5541

- Mail originals to:
CorrectiveSolutions
Attn: Megan McClung
910 Calle Negocio Suite 300
San Clemente, CA 92673



CorrectiveSolutions
Trust the Leader

START-UP PROGRAM STEP 1 CHECKLIST

Step 1 - Approve & Sign

- Dispute Resolution Criteria
- Prosecution Review Criteria
- Remaining Letter Series – Part 2
 - Approval form
 - Letter Series Timing Sequence
 - Remaining Letter Series – Part 2



Corrective*Solutions*
Trust the Leader

National Headquarters: 910 Calle Negocio Suite 300, San Clemente California 92673
800.325.3910 www.CorrectiveSolutions.org

Dispute Resolution Criteria



Glenn County District Attorney Bad Check Restitution Program Dispute Resolution Criteria

As the District Attorney of Glenn County, California, vested with the authority to establish a bad check pre-trial diversion program (Program) and as per the Financial Services Regulatory Relief Act of 2006 (Act), and the Administrative Support Services Agreement (Agreement) and applicable state and federal laws, I hereby authorize and direct the Program with this communication to follow certain criteria in the administration of the Program and in the handling of check writer disputes as outlined below:

1. Authorization to request documentation:

When a check writer disputes their inclusion in the Program or the accuracy of the information provided by the Program, I authorize and direct CorrectiveSolutions as the Program's administrator, per the Agreement, to request the documents listed below as well as any other documents that are necessary to resolve the dispute.

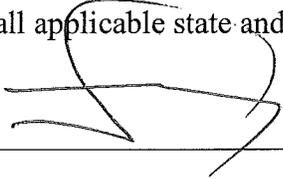
Type of Dispute	Needed Documents
Lost/Stolen/Forged/ID Theft	Police report or report number Affidavit of forgery
Stop Payment	Bank statements Stop payment order Receipt for returned goods
Direct Payment to Victim	Proof of payment from check writer and/or verification of receipt of funds from victim Document pertaining to sale transactions (invoice)
Bankruptcy (if authorized for intake)	Copy of petition and date
Levy, Lien, Garnishment, Bank Error	Copy of levy, lien, garnishment order or bank letter, as appropriate
Fraud on Check Writers Account Causing Check to be Returned	Police report or report number and/or letter from financial institution
Ineligible Check Writers	As relevant copy of the death certificate or proof of age (birth certificate) or statement of check writer's mental competence from a medical professional

2. Authorization to process and resolve disputes:

Upon receipt of the above listed documents and information, I authorize and direct the Program to review the documents using reasonable judgment to determine accuracy, validity and authenticity; and to then follow the directives below.

- If documents are complete and valid, close out relevant check(s) and notify the victim.
- If documents are civil in nature, close out the relevant check(s) and notify the victim.
- If documents are reasonably determined incomplete or not valid, the relevant checks shall remain in the Program.
- If documents cannot be reasonably determined valid or authentic, they shall be forwarded to my appointed representative (Communications Officer) for determination of the check writers continued participation in the program.
- For disputes where full restitution is not contested, class and class fees may be waived and restitution and administrative fees may be recovered.
- Disputes that reasonably qualify as "written disputes" per the Act, shall be forwarded to my Communications Officer or other appointed representative. In the event the Communications Officer does not advise direction to the Program within 30 days, I direct the Program to close out the relevant check(s) and notify the victim

I affirm and attest the above instructions are issued under the authority and direction and in compliance with all applicable state and federal laws on this date March 13, 2013.



Signature

ROBERT J. MALONEY

Name

GLENN COUNTY DISTRICT ATTORNEY

Title

Prosecution Criteria



Glenn County District Attorney Bad Check Restitution Program Prosecution Review Criteria

As the District Attorney of Glenn County, California, vested with the authority to establish a bad check pre-trial diversion Program (Program) and as per the Financial Services Regulatory Relief Act of 2006 (Act) and the Administrative Support Services Agreement (Agreement) and applicable state and federal laws, I hereby authorize and direct the Program with this communication to follow certain criteria in the administration of the Program and in the determination of eligibility for the prosecution review process as outlined below.

Definitions:

The misdemeanor statute of limitations is 1 year(s) from the date of alleged crime.

The felony statute of limitations is 3 year(s) from the date of alleged crime.

The dollar amount of a check that may be forwarded for prosecution review must be greater than \$ 100.00.

Note: This amount is not the same as your intake dollar amount threshold. This is what checks your office will prosecute on.

Cases shall be forwarded for prosecution review up to 5 to 6 months prior to the statute of limitations expiring.

Requirements for Prosecution Review are circled below:

1. Notice of the dishonored check provided by the victim to the check writer:

is ~~is not~~ required for prosecution review.

is/ is not required for checks written on a closed account.

When notification of the check writer is required, the following types of notification shall be acceptable:

- Written notice
- Certified notice
- Certified notice including return receipt
- Process server proof of receipt
- Other: _____

2. Identification of the check writer:

is ~~is not~~ required for prosecution review.

When identification of the check writer is required, the following means of identifying the check writer shall be acceptable:

- A government issued form of identification (e.g.; drivers license, state ID card, passport and or a membership card that was obtained by providing a government issued ID), verified at the time the check was accepted.
- Victim is able to identify the check writer from a photo line-up.
- Biometric technology.
- Other: _____

3. A witness to the alleged crime:

~~is ~~is not~~~~ required for prosecution review.

When a witness is required, the following shall be acceptable:

- The victim
- A store manager that can testify about check acceptance procedures
- Video surveillance, photographs.
- Other: _____

4. Checks written by check writers living out of state:

~~shall~~ shall not be forwarded for prosecution review, if the check meets all other criteria.

5. A check dishonored due to a stop payment order:

~~shall~~ / shall not be forwarded for prosecution review, if the check meets all other criteria.

6. A check that has been partially paid to the program:

shall ~~shall not~~ be forwarded for prosecution review, if the check meets all other criteria.

7. Checks that are included in a bankruptcy petition:

~~shall~~ ^{may} ~~shall not~~ be forwarded for prosecution review, if the checks meet all other prosecution review criteria.

If all of the above prosecution review criteria are met,

8. Bank records:

shall ~~shall not~~ be requested by the Program as per state statute _____ .
~~shall~~ / shall not include a request for a copy of the signature card on file for the account.
shall / ~~shall not~~ be reviewed for relevant bank account activity.

9. If applicable, checks written on an account with over-draft protection:

~~shall~~ ^{may} ~~shall not~~ be forwarded for prosecution review, if the checks meet all other prosecution review criteria.

10. If applicable, checks written on a joint-account:

~~shall~~ ^{may} ~~shall not~~ be forwarded for prosecution review, if the checks meet all other prosecution review criteria.

My office ~~will~~ ^{may} ~~will not~~ recommend a defendant be required to attend class as part of a plea agreement.
(Court ordered forms will be provided if office desires to make this a standard procedure)

In the event the check writer fails to comply with the Program, the case does not meet prosecution review criteria, or the victim is unable to provide all required documentation, the victim shall be notified the case is non-prosecutable via fax or email if they have requested such notification. Checks shall be returned to the victim upon request.

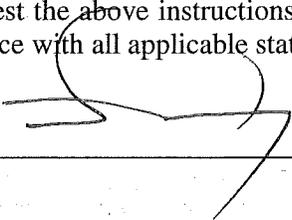
Cases that meet the above criteria and/or any case I identify for prosecution review shall be sent to the following:

Name: Robert J. Maloney Title: District Attorney
Phone: (530) 934-6525 Email: rmaloney@countyofglenn.net
Address: P.O. Box 430, Willows, CA 95988

30 days after the Program forwards a case for prosecution review, victims that would like to inquire as to the status of a case may contact the following individual for a status update. *(If different than contact listed above):*

Name: Robert J. Maloney Title: District Attorney
Phone: (530) 934-6525 Email: do not release
Address: P.O. Box 430, Willows, CA 95988

I affirm and attest the above instructions are issued under my authority and direction as per the Agreement and in compliance with all applicable state and federal laws on this date March 13, 20 13.



Signature

ROBERT J. MALONEY

Name

GLENN COUNTY DISTRICT ATTORNEY

Title

Remaining Letter Series Part 2



Glenn County District Attorney Bad Check Restitution Program Letter Series Approval – Part 2

As the District Attorney of Glenn County, California, vested with the authority to establish a bad check pre-trial diversion program (Program) and as per the Financial Services Regulatory Relief Act of 2006 (Act), and the Administrative Support Services Agreement (Agreement) and applicable state and federal laws, I hereby authorize and direct the Program with this communication:

Approved With No Changes. I have reviewed the letter series that is attached and approved timing schedule for Program use in my jurisdiction as so specified. I have made no changes to the letters or timing schedule.

Signature: _____ Date: 3/13/13

Title: GLENN COUNTY DISTRICT ATTORNEY

Approved With Changes. I have reviewed the letter series and approved timing schedule for Program use in my jurisdiction as so specified per my changes. I have amended the letters / timing schedule and my changes are initialed.

Signature: _____ Date: _____

Title: _____

NOTE: Minor changes may be made from time to time for administrative efficiencies.
Any future changes of consequence will be brought to your attention for approval.

Remaining Letter Series Core Timing Schedule

	<u>Purpose</u>	<u>When Sent</u>	<u>Call to Action</u>
Forward	Case Forwarded for Potential Criminal Prosecution	When case passes prosecution review	Immediate response required



Calaveras County District Attorney
Bad Check Restitution Program
PO Box 1480
San Andreas, CA 95249-1480

Barbara M. Yook
District Attorney



CASE FORWARDED FOR POTENTIAL CRIMINAL PROSECUTION

*** 0217REG.WHT.004
3000000008 01.0000.0000 5/1



JOHN Q PUBLIC
PO BOX 12345
DESERT HOT SPRINGS CA 92240

Office Hours: 9:00 a.m. - 5:00 p.m.
Phone: (866)740-7234
Date of Notice: 02/17/2012
Case #: 39156591
Balance Due: \$288.63
Page: 1

Your case has been reviewed and forwarded to the District Attorney for consideration of prosecution under California Penal Code 476a, entitled "Making or Delivering Check With Insufficient Funds", due to your failure to complete the requirements of the Bad Check Restitution Program.

The Calaveras County District Attorney is officially pursuing a criminal investigation of the report(s) of bad check activity initiated against you. Your immediate response may be able to cease this action.

Our records indicate that you currently have an outstanding balance of \$288.63.

You are scheduled to attend the Financial Accountability class on ??? .

If you fail to cancel your scheduled class without 48 hours notice or cancel subsequent classes, you may be required to pay \$25.00 rescheduling fee for each occurrence. Successful completion of the program requires that you comply with all Bad Check Restitution Program requirements including full payment of restitution and all program fees and attendance of the Financial Accountability class. You may receive further notices and/or phone calls while program requirements remain outstanding.

Successful completion of the program requires that you comply with all Bad Check Restitution Program requirements including full restitution, all fees and attendance of the Financial Accountability class. You may receive further notices and/or phone calls while program requirements remain outstanding.

Thank you for your immediate attention to this matter.

Sincerely,

Barbara M. Yook
District Attorney

The Calaveras County District Attorney's Bad Check Restitution Program is administered by a private entity under contract with the Calaveras County District Attorney.

To Make Payment/Schedule Class, call (866)740-7234 or www.checkprogram.com

Case Number: 99999999 Password: 99999999

PAYMENTS ACCEPTED: CREDIT & DEBIT CARDS, WESTERN UNION, MONEY ORDERS, OR CASHIER'S CHECK



Calaveras County District Attorney
Bad Check Restitution Program
PO Box 1480
San Andreas, CA 95249-1480

Barbara M. Yook
District Attorney



09

CASE INFORMATION: BALANCE OWING

*** 0217REG.WHT.004
3000000009 01.0000.0000 6/1



JOHN Q PUBLIC
PO BOX 12345
MURRIETA CA 92562

Office Hours: 9:00 a.m. - 5:00 p.m.
Phone: (866)740-7234
Date of Notice: 02/17/2012
Case #: 39156591
Balance Due: \$288.63
Page: 1

Per your request, we are sending you an additional Notice of the amount needed to resolve the Bad Check Restitution Program case you have with this office.

Our records indicate that you currently have an outstanding balance of \$288.63.

Please note, your balance may increase if additional checks are reported to this Office or Program fees are changed. Additionally, you may incur a fee for missing or rescheduling class, making a late or insufficient payment, and/or paying over the phone or Internet.

You are scheduled to attend the Financial Accountability class on ??? .

If you fail to cancel your scheduled class without 48 hours notice or cancel subsequent classes, you may be required to pay \$25.00 rescheduling fee for each occurrence. Successful completion of the program requires that you comply with all Bad Check Restitution Program requirements including full payment of restitution and all program fees and attendance of the Financial Accountability class. You may receive further notices and/or phone calls while program requirements remain outstanding.

Successful completion of the program requires that you comply with all Bad Check Restitution Program requirements including full restitution, all fees and attendance at the Financial Responsibility class.

To pay your outstanding balance and/or schedule your class, please call (866)740-7234 or go to our secure website at www.checkprogram.com. To access your case online you will need to enter your case number, which is 999999, and the following password: 999999.

Thank you for your immediate attention to this matter.

The Calaveras County District Attorney's Bad Check Restitution Program is administered by a private entity under contract with the Calaveras County District Attorney.

To Make Payment/Schedule Class, call (866)740-7234 or www.checkprogram.com

Case Number: 99999999 Password: 99999999

PAYMENTS ACCEPTED: CREDIT & DEBIT CARDS, WESTERN UNION, MONEY ORDERS, OR CASHIER'S CHECK



Calaveras County District Attorney
Bad Check Restitution Program
PO Box 1480
San Andreas, CA 95249-1480

Barbara M. Yook
District Attorney



10

NOTICE OF ADDITIONAL BAD CHECKS REPORTED

*** 0217DUP.WHT.004
3000000004 01.0000.0000 2/1



JOHN Q PUBLIC
PO BOX 12345
RIALTO CA 92376

Office Hours: 9:00 a.m. - 5:00 p.m.

Phone: (866)740-7234

Date of Notice: 02/17/2012

Case #: 39156591

Balance Due: \$288.63

Page: 1

You have been accused again of violating California Penal Code 476a, entitled "Making or Delivering Check With Insufficient Funds". A conviction under this statute is punishable by up to one (1) year in the county jail. See page 5 for details on the party(s) initiating this allegation.

My office has established a Bad Check Restitution Program. The Bad Check Restitution Program is authorized by the California legislature, and is a pre-charge program designed to allow people accused of having violated the above-referenced statute to avoid the possibility of further action against the accused by the District Attorney's Office. Participation in the Bad Check Restitution Program is voluntary. The Bad Check Restitution Program has two steps:

1. Pay all restitution on all reported checks, plus any administrative, returned item, and program fees.
2. Attend a Financial Accountability class.

Calaveras County District Attorney Bad Check Restitution Program

TOTAL BALANCE DUE: \$288.63

You have the right to dispute this matter, as set forth on page 2 of this notice. In order to participate in the Bad Check Restitution Program you must pay in full and schedule class within THIRTY (30) DAYS from the date of this Notice.

PLEASE CALL (866)740-7234 or visit www.checkprogram.com
TO MAKE PAYMENT/SCHEDULE CLASS

Please have your case number ready: 39156591 and Password: 99999999

PAYMENTS ACCEPTED: CREDIT & DEBIT CARDS, WESTERN UNION, MONEY ORDERS, OR CASHIER'S CHECK

If you choose to participate in the Bad Check Restitution Program, and if you successfully complete the program's two steps above, my office will consider this matter resolved. The Bad Check Restitution Program is administered by a private entity under contract with the Calaveras County District Attorney.

For additional information or if you believe you received this Notice in error, please see the reverse side.

Sincerely,

Barbara M. Yook
District Attorney

See reverse side →

This notice has been printed and mailed on behalf of my office by a third party administrator of the Bad Check Restitution Program at no cost to the taxpayer.

■ **IF YOU BELIEVE YOU RECEIVED THIS NOTICE IN ERROR OR WISH TO DISPUTE THIS NOTICE IN WRITING:**

- Review your records CAREFULLY.
- Call the District Attorney's Bad Check Restitution Program Office at (866)740-7234.
- Ask for a Compliance Specialist.
- Explain the error.
- The Compliance Specialist will ask you to fax or mail in documentation of the error. For cases involving stop payments on checks or performance disputes, please consult a Compliance Specialist for more information.
- You may dispute the validity of this allegation in writing to this Office within 30 days of receiving this Official Notice. Upon submitting your written dispute not later than 30 days after receiving the Official Notice (along with any relevant supporting documentation), the authorized administrator of the Bad Check Restitution Program will review the written dispute based on criteria established by the Calaveras County District Attorney.
- Fax or mail your case documentation to: **Fax: (800) 227-3041**

**Calaveras County District Attorney
Bad Check Restitution Program
PO Box 1480
San Andreas, CA 95249-1480**

■ **IF YOU BELIEVE YOU RECEIVED THIS NOTICE AS A RESULT OF IDENTITY THEFT, FORGERY, THEFT, OR OTHER FRAUD:**

You will be required to promptly provide further written documentation to support your claim. If you are a victim of identity theft, you will need to go to the bank to obtain and sign an identity theft affidavit. If you were not the victim of identity theft but did not write the check(s), you will need to go to the bank to obtain and sign an affidavit of forgery that you did not write the check(s) in question. In most cases, if you believe the check(s) were stolen or forged, you will also be required to file a police report.

■ **IF YOU BELIEVE YOU WERE NOT PROPERLY NOTIFIED:**

The Bad Check Restitution Program is only for reports of bad check activity from those businesses or parties that have notified you according to California State Law and provided you with an opportunity to make good on the check. In addition to notification from the party you issued the check to banks routinely send customers notice of returned items. Non-sufficient funds (NSF) checks also appear on your monthly account statement. **PLEASE CHECK YOUR RECORDS CAREFULLY.**

■ **IF YOU HAVE ALREADY PAID THE MERCHANT OR FILING PARTY:**

Please fax or mail documentation that the merchant or filing party received payment BEFORE the date of this Notice. Appropriate documentation consists of a receipt of payment to the victim and/or a cleared copy (front and back) of repayment to the victim. The administrator of the Bad Check Restitution Program will review the submitted documentation. Allow fourteen (14) days to process information before calling.

■ **IF YOU WANT TO CONTEST THIS MATTER:**

You have the right to choose not to participate, and to contest this matter. If you wish, you may want to consult an attorney. Personal bankruptcies DO NOT void responsibility in a criminal matter.

To Make Payment/Schedule Class, Call (866)740-7234 or www.checkprogram.com

Case Number: 39156591 Password: 99999999

PAYMENTS ACCEPTED: CREDIT & DEBIT CARDS, WESTERN UNION, MONEY ORDERS, OR CASHIER'S CHECK

DISPUTES, TERMS AND CONDITIONS, AND OTHER IMPORTANT INFORMATION

Page: 3

■ TERMS AND CONDITIONS OF THE BAD CHECK RESTITUTION PROGRAM:

Participant agrees to participate in the Calaveras County District Attorney Bad Check Restitution Program ("Program"). Participant acknowledges and agrees that the fees charged for the Program are reasonable and appropriate. Participant acknowledges and agrees that in addition to the fees that are charged, participant is required to attend a rehabilitative counseling class conducted by an instructor hired by the private entity under contract with the District Attorney to administer the Program ("Administrator"). Participant further agrees that by paying the fees charged for the Program, participant is bound by the terms and conditions of the Program, as set forth in this agreement.

Agreement to Arbitrate: You and Administrator agree to resolve any and all claims and disputes relating in any way to the Program ("Claims"), except for Claims concerning the validity, scope or enforceability of this Arbitration Agreement, through BINDING INDIVIDUAL ARBITRATION before the American Arbitration Association ("AAA"). This means you will be unable to have Claim(s) resolved by a court or jury, or to participate in a class action or class arbitration. Other rights you would have if you went to court may be unavailable or limited in arbitration, including your right to appeal. The only exception to this agreement to arbitrate is that you and/or Administrator may seek relief in a small claims court for Claims within the jurisdiction of that court in any particular state.

CLASS ACTION WAIVER: NO ARBITRATOR OR COURT MAY ORDER, PERMIT OR CERTIFY A CLASS ACTION, REPRESENTATIVE ACTION, PRIVATE ATTORNEY-GENERAL ACTION OR CONSOLIDATED ARBITRATION IN CONNECTION WITH THIS ARBITRATION AGREEMENT. NO ARBITRATOR OR COURT MAY ORDER OR PERMIT A JOINDER OF PARTIES IN CONNECTION WITH THIS ARBITRATION AGREEMENT UNLESS ALL PARTIES CONSENT TO SUCH JOINDER IN WRITING.

Governing Law and Jurisdiction: Any arbitration proceeding will be governed by the Consumer Procedures or other applicable rules of AAA in effect when the Claim is filed. The arbitration proceeding will take place in the county where you reside or any other mutually acceptable location. Judgment on the arbitration award may be entered in any court having jurisdiction.

The arbitrator shall follow applicable law and is empowered to grant any relief, including attorneys' fees, costs, and other expenses, to the extent such relief would be available in court. You and Administrator agree the Program and transactions subject to this Arbitration Agreement involve interstate commerce and that this Arbitration Agreement is governed by and enforceable under the Federal Arbitration Act. You and Administrator also agree this Arbitration Agreement extends to parties related to Administrator that are involved in any Claims, including without limitation, Administrator's parents, affiliates, subsidiaries, agents, principals, contractors, officers and employees.

Costs: Administrator shall pay all arbitration costs if it initiates arbitration. If you initiate arbitration, you will not be required to pay any fees that exceed the fees you would have paid had you brought the Claim(s) in court. You may seek a waiver of the filing fee under AAA Rules. If you do not qualify for a waiver, you may request, in writing, that Administrator advance all or part of the filing fee.

Enforceability: This Arbitration Agreement shall govern if there is a conflict between it and the AAA Rules, unless Administrator waives any conflict in writing. If any part of this Arbitration Agreement, except the class action waiver, is found invalid or unenforceable, the remaining provisions shall remain in full force and effect. If the class action waiver is found invalid or unenforceable as to a particular Claim, the Arbitration Agreement shall not apply to that Claim.

You may contact AAA to obtain information about arbitration, arbitration procedures and fees by calling 800-778-7879 or visiting www.adr.org.

YOU HAVE THE RIGHT TO REJECT THIS ARBITRATION AGREEMENT, BUT YOU MUST DO SO PROMPTLY. If you do not agree to arbitration, you must notify us in writing within sixty (60) days after the date you enroll in the Program. You must send your notice to: 806 E Avenida Pico STE 1 PMB 340, San Clemente, CA 92673-5639, and include your full name, address, and the statement "I reject the arbitration agreement for the Calaveras County District Attorney Bad Check Restitution Program."

■ OTHER IMPORTANT INFORMATION:

Completion of the Bad Check Restitution Program is valid ONLY if you comply with ALL District Attorney's requirements. Should you be permitted to comply by a payment plan, such payments may be allocated ratably between restitution and program fees until they are fully satisfied. By making full or partial payment, you are agreeing to be enrolled in the Bad Check Restitution Program, and you are agreeing to pay restitution on all reported checks as well as pay all required fees, including program, administrative, and returned item fees pursuant to the terms of this Notice. Once enrolled, program fees will be non-refundable.

You may wish to consult an attorney to obtain legal advice about your rights in regards to this matter.

The Program does not accept personal checks. Sending a personal check for payment shall be deemed sufficient authorization to complete the payment via electronic debit. By doing so, your checking account will be debited for the amount of the check and your cancelled check will not be returned to your bank. Electronic debit entries returned for insufficient or uncollected funds may be resubmitted two times following the return of the original entry.

Please note, your balance may increase if additional checks are reported to this office or program fees are changed. Additionally, you may incur a fee for missing or rescheduling class, making a late or insufficient payment, and/or paying over the phone or Internet.



Calaveras County District Attorney
Bad Check Restitution Program
 PO Box 1480
 San Andreas, CA 95249-1480

Barbara M. Yook
 District Attorney

NOTICE OF ADDITIONAL BAD CHECKS REPORTED

BALANCE DUE ON 03/07/2012

\$288.63

Office Hours: 9:00 a.m. - 5:00 p.m.
 Page: 5 of 5

PAYMENT OPTIONS:

- 1. INTERNET** **www.checkprogram.com**
 Case Number: 39156591
 Password: 99999999
 Credit and Debit Cards

- 2. PHONE** (866)740-7234
 Credit and Debit Cards or Western Union

- 3. MAIL** **Calaveras County District Attorney**
 Bad Check Restitution Program
 PO Box 1480
 San Andreas, CA 95249-1480
 Money Orders and Cashier's Checks Only

VICTIM	CHECK #	DATE	AMOUNT	RETURNED ITEM FEE	ADMIN FEE	TOTAL THIS CHECK
MARY'S FLOWER SHOPPE	4530	10/29/2011	\$67.38	\$1.25	\$50.00	\$118.63
Financial Accountability Class Fee						\$170.00
TOTAL BALANCE DUE:						\$288.63

*** Additional service fee may be due victim. ***

To Make Payment/Schedule Class, Call (866)740-7234 or www.checkprogram.com
 Case Number: 39156591 Password: 99999999
PAYMENTS ACCEPTED: CREDIT & DEBIT CARDS, WESTERN UNION, MONEY ORDERS, OR CASHIER'S CHECK



Calaveras County District Attorney
Bad Check Restitution Program
PO Box 1480
San Andreas, CA 95249-1480

Barbara M. Yook
District Attorney



11

REPORT OF BAD CHECK ACTIVITY DISCHARGED

*** 0217REG.WHT.004
3000000010 01.0000.0000 7/1

Office Hours: 9:00 a.m. - 5:00 p.m.



Date of Notice: 02/17/2012
Case #: 39156591

JOHN Q PUBLIC
PO BOX 12345
REDONDO BEACH CA 90278

Page: 1

The report(s) of bad check activity initiated by MARY'S FLOWER SHOPPE has been discharged.

Check #: 4530
Amount: \$67.38
Date: 10/29/2011

No further action will be taken by this Office regarding this matter. Please contact the recipient of this check to verify this has been cleared. Possible civil action could be pending.

In the event you may need further assistance in connection with this matter, please call this Office during the hours listed above.

Thank you for your cooperation.



Calaveras County District Attorney
Bad Check Restitution Program
PO Box 1480
San Andreas, CA 95249-1480

Barbara M. Yook
District Attorney



12

SUCCESSFUL PROGRAM COMPLETION

*** 0217REG.WHT.004
3000000011 01.0000.0000 8/1



JOHN Q PUBLIC
PO BOX 12345
CATHEDRAL CITY CA 92234

Office Hours: 9:00 a.m. - 5:00 p.m.
Phone: (866)740-7234
Date of Notice: 02/17/2012
Case #: 39156591
Balance Due: \$288.63
Page: 1

This letter is to verify that you have completed all requirements of the Calaveras County District Attorney Bad Check Restitution Program.

In the event that this office receives an additional report(s) of bad check activity against you, the following action would take place:

1. If the additional check(s) was/were written PRIOR to your enrollment in the Financial Accountability class, you will be responsible to pay off the check(s) AND an administrative fee of \$50.00 (per check).
2. If the additional check(s) was/were written AFTER your enrollment in the Financial Accountability class, you will not be eligible to participate in the Bad Check Restitution Program.

We appreciate your commitment in completing the Program requirements. Please contact the office should you have any further questions regarding this matter. You may reach us at (866)740-7234.

The Calaveras County District Attorney's Bad Check Restitution Program is administered by a private entity under contract with the Calaveras County District Attorney.

To Make Payment/Schedule Class, call (866)740-7234 or www.checkprogram.com

Case Number: 99999999 Password: 99999999

PAYMENTS ACCEPTED: CREDIT & DEBIT CARDS, WESTERN UNION, MONEY ORDERS, OR CASHIER'S CHECK



Calaveras County District Attorney
Bad Check Restitution Program
PO Box 1480
San Andreas, CA 95249-1480

Barbara M. Yook
District Attorney



13

APPROVED PAYMENT SCHEDULE

*** 0217REG.WHT.004
3000000012 01.0000.0000 9/1



JOHN Q PUBLIC
PO BOX 12345
GARDEN GROVE CA 92843

Office Hours: 9:00 a.m. - 5:00 p.m.
Phone: (866)740-7234
Date of Notice: 02/17/2012
Case #: 39156591
Balance Due: \$288.63
Page: 1

The payment schedule outlined below has been approved by this Office.

Our records indicate that you currently have an outstanding balance of \$288.63.

You are scheduled to attend the Financial Accountability class on ??? .

If you fail to cancel your scheduled class without 48 hours notice or cancel subsequent classes, you may be required to pay \$25.00 rescheduling fee for each occurrence. Successful completion of the program requires that you comply with all Bad Check Restitution Program requirements including full payment of restitution and all program fees and attendance of the Financial Accountability class. You may receive further notices and/or phone calls while program requirements remain outstanding.

Please be aware that all payments **MUST** be received by the dates specified above. A fee up to \$10.00 may be assessed to your case for each late payment and for each payment made that is less than an amount specified above in the approved payment schedule.

To make your payment over the phone, please call (866)740-7234. Alternatively, you may make a secure payment at www.CheckProgram.com. To access your case online, you will need to enter your case number, which is 999999, and the following password: 999999.

Successful completion of the program requires that you comply with all Bad Check Restitution Program requirements including full restitution, all fees and attendance of the Financial Accountability class. You may receive further notices and/or phone calls while program requirements remain outstanding.

If you have any questions regarding this Notice, please call (866)740-7234.

To Make Payment/Schedule Class, call (866)740-7234 or www.checkprogram.com

Case Number: 99999999 Password: 99999999

PAYMENTS ACCEPTED: CREDIT & DEBIT CARDS, WESTERN UNION, MONEY ORDERS, OR CASHIER'S CHECK



Calaveras County District Attorney
Bad Check Restitution Program
PO Box 1480
San Andreas, CA 95249-1480

Barbara M. Yook
District Attorney



14

NOTICE OF LATE PAYMENT

*** 0217REG.WHT.004
3000000014 01.0000.0000 10/1



JOHN Q PUBLIC
PO BOX 12345
LOS ANGELES CA 90043

Office Hours: 9:00 a.m. - 5:00 p.m.
Phone: (866)740-7234
Date of Notice: 02/17/2012
Case #: 39156591
Balance Due: \$288.63
Page: 1

You have failed to comply with your payment agreement with this Office. As a result, you must now contact our Office and make payment within 72 Hours. Failure to do so may result in assessment of late payment fees.

Our records indicate that you currently have an outstanding balance of \$288.63.

You are scheduled to attend the Financial Accountability class on Saturday, June 30, 2012.

If you fail to cancel your scheduled class without 48 hours notice or cancel subsequent classes, you may be required to pay \$25.00 rescheduling fee for each occurrence. Successful completion of the program requires that you comply with all Bad Check Restitution Program requirements including full payment of restitution and all program fees and attendance of the Financial Accountability class. You may receive further notices and/or phone calls while program requirements remain outstanding.

Successful completion of the program requires that you comply with all Bad Check Restitution Program requirements including full restitution, all fees and attendance of the Financial Accountability class. You may receive further notices and/or phone calls while program requirements remain outstanding.

If you have already mailed or arranged your required payment(s) and completed or scheduled the educational class, please disregard this Notice. Otherwise, please call (866)740-7234 or go to our secure website at www.checkprogram.com. To access your file online you will need to enter your case number, which is 999999, and the following password: 999999.

The Calaveras County District Attorney's Bad Check Restitution Program is administered by a private entity under contract with the Calaveras County District Attorney.

To Make Payment/Schedule Class, call (866)740-7234 or www.checkprogram.com

Case Number: 99999999 Password: 99999999

PAYMENTS ACCEPTED: CREDIT & DEBIT CARDS, WESTERN UNION, MONEY ORDERS, OR CASHIER'S CHECK



Calaveras County District Attorney
Bad Check Restitution Program
PO Box 1480
San Andreas, CA 95249-1480

Barbara M. Yook
District Attorney

15

NOTICE OF RETURNED PAYMENT

*** 0217here.WHT.004
3000000001 01.0000.0000 1/1



JOHN Q PUBLIC
PO BOX 12345
RIVERSIDE CA 92506

Office Hours: 9:00 a.m. - 5:00 p.m.
Phone: (866)740-7234
Date of Notice: 02/17/2012
Case #: 39156591
Balance Due: \$288.63
Page: 1

We regret that we must return the recent payment you've made. We are unable to apply this payment for the reason(s) checked below:

We do not accept personal checks. Please see the footer of this letter for acceptable payment methods.

The payment is made out to the wrong payee. Please remit payment to the Calaveras County District Attorney Bad Check Restitution Program.

Other: _____.

Our records indicate that you currently have an outstanding balance of \$288.63.

You are scheduled to attend the Financial Accountability class on ??? .

If you fail to cancel your scheduled class without 48 hours notice or cancel subsequent classes, you may be required to pay \$25.00 rescheduling fee for each occurrence. Successful completion of the program requires that you comply with all Bad Check Restitution Program requirements including full payment of restitution and all program fees and attendance of the Financial Accountability class. You may receive further notices and/or phone calls while program requirements remain outstanding.

Successful completion of the program requires that you comply with all Bad Check Restitution Program requirements including full restitution, all fees and attendance of the Financial Accountability class. You may receive further notices and/or phone calls while program requirements remain outstanding.

Please remit proper payment immediately.

If you have already mailed or arranged your required payment(s) and completed or scheduled the educational class, please disregard this Notice. Otherwise, please call (866)740-7234 or go to our secure website at www.checkprogram.com. To access your file online you will need to enter your case number, which is 999999, and the following password: 999999.

To Make Payment/Schedule Class, call (866)740-7234 or www.checkprogram.com

Case Number: 99999999 Password: 99999999

PAYMENTS ACCEPTED: CREDIT & DEBIT CARDS, WESTERN UNION, MONEY ORDERS, OR CASHIER'S CHECK



Calaveras County District Attorney
Bad Check Restitution Program
PO Box 1480
San Andreas, CA 95249-1480

Barbara M. Yook
District Attorney

15

*** 0217here.WHT.004
3000000003 01.0000.0000 2/1



JOHN Q PUBLIC
PO BOX 12345
CHICAGO CA 60619

Office Hours: 9:00 a.m. - 5:00 p.m.
Phone: (866)382-9310
Date of Notice: 02/17/2012

Page: 1

Check writer: John Smith
Reference: 999999
Exhibit No: 999999

Thank you for the payment(s) forwarded for the check writer mentioned above. However, we are unable to apply this payment for the reason(s) marked below:

The payment is made to your company. Please endorse to Calaveras County District Attorney and return as soon as possible.

We are unable to locate this check writer in our system to apply the payment. Please indicate below the exact spelling of the name as it was submitted to our office and return with payment.

Other: _____

Thank you and if you should need additional information, please contact our office at (866)382-9310.

Sincerely,

Victim Services



Calaveras County District Attorney
Bad Check Restitution Program
PO Box 1480
San Andreas, CA 95249-1480

Barbara M. Yook
District Attorney



16

ACH DEBIT ENTRY CONFIRMATION

*** 0217REG.WHT.004
3000000015 01.0000.0000 11/1



JOHN Q PUBLIC
PO BOX 12345
GRAND JUNCTION CA 81501

Office Hours: 9:00 a.m. - 5:00 p.m.
Phone: (866)740-7234
Date of Notice: 02/17/2012
Case #: 39156591
Balance Due: \$288.63
Page: 1

Per your authorization given on July 24, 2006, we will originate an ACH debit entry to your bank account in the amount of \$71.00. This debit will occur on or after July 25, 2006. Please note the debit amount in your bank account register.

Completion of the Program is only valid if you comply with ALL Bad Check Restitution Program requirements, including paying your outstanding balance and attending class.

If you have additional questions regarding this transaction, please call this Office at (866) 324-1540.

The Calaveras County District Attorney's Bad Check Restitution Program is administered by a private entity under contract with the Calaveras County District Attorney.

To Make Payment/Schedule Class, call (866)740-7234 or www.checkprogram.com

Case Number: 99999999 Password: 99999999

PAYMENTS ACCEPTED: CREDIT & DEBIT CARDS, WESTERN UNION, MONEY ORDERS, OR CASHIER'S CHECK



Calaveras County District Attorney
Bad Check Restitution Program
PO Box 1480
San Andreas, CA 95249-1480

Barbara M. Yook
District Attorney



17

STEPS FOR FRAUD REVIEW

*** 0217DUP.WHT.004
3000000007 01.0000.0000 3/1



JOHN Q PUBLIC
PO BOX 12345
HEMET CA 92545

Office Hours: 9:00 a.m. - 5:00 p.m.
Phone: (866)740-7234
Date of Notice: 02/17/2012
Case #: 39156591
Balance Due: \$288.63
Page: 1

Thank you for responding to the report(s) of bad check activity initiated against you. We are sorry to learn you may be the victim of fraud. In order to review and potentially close your case for fraud, we need the following items:

[X] Complete and sign the attached Affidavit of Forgery. The Affidavit **MUST BE NOTARIZED**. If you have already filed an Affidavit of Forgery with your bank, please send this Office a copy.

[X] Provide this Office with a copy of a Police Report regarding the circumstances involving your lost or stolen checks.

Please fax or mail a copy of the information marked above to:

Fax: (800)227-3041

Calaveras County District Attorney
Bad Check Restitution Program
c/o Disputes Department
PO Box 1480
San Andreas, CA 95249-1480

Please see the following pages for details on the check(s) included in the report(s) of bad check activity.

For additional tips on fighting back against identity theft, please see the Federal Trade Commission's website at <http://www.ftc.gov/bcp/edu/microsites/idtheft/>

For more information call (866)740-7234.

To Make Payment/Schedule Class, Call (866)740-7234 or www.checkprogram.com

Case Number: 39156591 Password: 99999999

PAYMENTS ACCEPTED: CREDIT & DEBIT CARDS, WESTERN UNION, MONEY ORDERS, OR CASHIER'S CHECK



Calaveras County District Attorney
Bad Check Restitution Program
PO Box 1480
San Andreas, CA 95249-1480

Barbara M. Yook
District Attorney

STEPS FOR FRAUD REVIEW

*** 0217DUP.WHT.004
3000000008 01.0000.0000 3/2

JOHN Q PUBLIC
PO BOX 12345
HEMET CA 92545

Office Hours: 9:00 a.m. - 5:00 p.m.
Phone: (866)740-7234
Date of Notice: 02/17/2012
Case #: 39156591
Balance Due: \$288.63
Page: 3

MERCHANT	CHECK #	DATE	AMOUNT
MARY'S FLOWER SHOPPE	4530	10/29/2011	\$67.38

To Make Payment/Schedule Class, Call (866)740-7234 or www.checkprogram.com

Case Number: 39156591 Password: 99999999

PAYMENTS ACCEPTED: CREDIT & DEBIT CARDS, WESTERN UNION, MONEY ORDERS, OR CASHIER'S CHECK

**AFFIDAVIT OF FORGED SIGNATURE - INDIVIDUAL
NOT VALID WITHOUT AUTHORIZED SEAL.**

State of _____ County of _____

I, _____ being first duly sworn, depose and say that:

1. I am the purported drawer of the checks in question, numbered _____, dated _____, 20 _____, drawn on _____, payable to the order of _____, for _____ Dollars, (\$ _____).

2. The signature of _____ on the instrument was not authorized, is a forgery, and was made without my knowledge or consent.

3. I have received no benefit or value from the proceeds of the instrument, directly or indirectly.

4. I have no knowledge or information concerning the signature or negotiation of the instrument except as follows (if none, state "None"): _____

5. This affidavit is made voluntarily and for the purpose of establishing the fact of forgery.

6. I will testify, declare, depose, or certify to the truth of any or all of the foregoing before any competent tribunal, officer, or person, and I will cooperate fully in the prosecution of the person or persons who forged the instrument.

Police Report Number: _____
(ATTACH COPY OF POLICE REPORT)

Name of law enforcement agency: _____

Law enforcement officer's full name: _____

Law enforcement officer's badge number: _____

I, hereby, certify under penalty of perjury that all information above is true to the best of my knowledge.
(Sign on all four lines below.)

1. _____ 2. _____
(SIGNATURE OF AFFIANT) (SIGNATURE OF AFFIANT)

3. _____ 4. _____
(SIGNATURE OF AFFIANT) (SIGNATURE OF AFFIANT)

Affiant's Address: _____ Phone: _____ / _____
(RESIDENCE) (BUSINESS)

City/State/Zip _____

Subscribed and sworn to before me this _____ day of _____ 20 _____

Type and number of identification used to authenticate Affiant: _____

(SEAL)

NOTARY PUBLIC

NOT VALID WITHOUT AUTHORIZED SEAL.



Calaveras County District Attorney
Bad Check Restitution Program
PO Box 1480
San Andreas, CA 95249-1480

Barbara M. Yook
District Attorney

ADDITIONAL DOCUMENTATION NEEDED

*** 0217here.WHT.004
3000000004 01.0000.0000 3/1



JOHN Q PUBLIC
PO BOX 12345
WEST COVINA CA 91791

Office Hours: 9:00 a.m. - 5:00 p.m.
Phone: (866)740-7234
Date of Notice: 02/17/2012
Case #: 39156591
Balance Due: \$288.63
Page: 1

Thank you for providing information regarding the report(s) of bad check activity initiated against you. Upon reviewing this information, we need further documentation. Please fax or mail a copy of the information marked below to:

Fax: (800)227-3041

Calaveras County District Attorney
Bad Check Restitution Program
PO Box 1480
San Andreas, CA 95249-1480

PROOF OF PAYMENT

- Receipt of repayment to merchant that shows original check number, amount and date of repayment.
- Cleared copy of front and back of repayment check to merchant with bank records for 30 days after it posted.
- Payment made after check was filed - unable to dismiss case. Contact our Office for further instruction.
- Copy of replacement payment (money order, cashier's check, replacement check, Western Union, etc.)
- For merchandise returned, receipt showing date of return and items returned.

STOLEN/FORGED CHECKS

- Copy of Police report and the name of the officer who took the report.
- Notarized Affidavit of Forgery.
- Notarized Identity Theft Affidavit.

Please see the following page for additional information.

To Make Payment/Schedule Class, call (866)740-7234 or www.checkprogram.com
Case Number: 99999999 Password: 99999999
PAYMENTS ACCEPTED: CREDIT & DEBIT CARDS, WESTERN UNION, MONEY ORDERS, OR CASHIER'S CHECK



Calaveras County District Attorney
Bad Check Restitution Program
PO Box 1480
San Andreas, CA 95249-1480

Barbara M. Yook
District Attorney

ADDITIONAL DOCUMENTATION NEEDED

*** 0217here.WHT.004
3000000005 01.0000.0000 3/2

JOHN Q PUBLIC
PO BOX 12345
WEST COVINA CA 91791

Office Hours: 9:00 a.m. - 5:00 p.m.
Phone: (866)740-7234
Date of Notice: 02/17/2012
Case #: 39156591
Balance Due: \$288.63
Page: 2

BANK ERROR OR OTHER INCIDENT

- Copy of unmarked bank statement showing account activity for 30 days after check date.
- Letter from bank stating their error (must be signed and on bank letterhead).
- Letter from bank stating theft or fraud on account caused check(s) to be returned (must be signed and on bank letterhead).
- Restitution/Administration fees of \$288.63 due (class attendance and fees are waived). Enclose this form with payment. Payments accepted include debit and credit cards, Western Union, cashier's check, money order, or direct withdrawal from your bank account (ACH).
- Letter of Lien, Levy, Hold or Garnishment to account that caused the return.

STOP PAYMENT

- Notarized statement that check acceptor was notified of stop payment due to unsatisfactory service. Additionally, we need bank statements showing account balance 10 days before and after check date.

DEATH

- Copy of Death Certificate.

The Calaveras County District Attorney's Bad Check Restitution Program is administered by a private entity under contract with the Calaveras County District Attorney.

To Make Payment/Schedule Class, call (866)740-7234 or www.checkprogram.com

Case Number: 99999999 Password: 99999999

PAYMENTS ACCEPTED: CREDIT & DEBIT CARDS, WESTERN UNION, MONEY ORDERS, OR CASHIER'S CHECK



Calaveras County District Attorney
Bad Check Restitution Program
PO Box 1480
San Andreas, CA 95249-1480

Barbara M. Yook
District Attorney

UNABLE TO DISMISS

*** 0217here.WHT.004
3000000006 01.0000.0000 4/1



JOHN Q PUBLIC
PO BOX 12345
SANTA ANA CA 92707

Office Hours: 9:00 a.m. - 5:00 p.m.
Phone: (866)740-7234
Date of Notice: 02/17/2012
Case #: 39156591
Balance Due: \$288.63
Page: 1

Thank you for providing information regarding the report(s) of bad check activity initiated against you. Upon reviewing this information, we are unable to dismiss your case. As a result, you must now comply with the Program requirements marked below:

Pay your outstanding balance.

Our records indicate that you currently have an outstanding balance of \$288.63.

Attend the Financial Accountability class.

Successful completion of the program requires that you comply with all Bad Check Restitution Program requirements including full restitution, all fees and attendance of the Financial Accountability class. You may receive further notices and/or phone calls while program requirements remain outstanding.

Completion of the Program is only valid if you comply with ALL Program requirements.
For more information call (866)740-7234.

Thank you for your immediate attention to this matter.

The Calaveras County District Attorney's Bad Check Restitution Program is administered by a private entity under contract with the Calaveras County District Attorney.

To Make Payment/Schedule Class, call (866)740-7234 or www.checkprogram.com
Case Number: 99999999 Password: 99999999
PAYMENTS ACCEPTED: CREDIT & DEBIT CARDS, WESTERN UNION, MONEY ORDERS, OR CASHIER'S CHECK



Calaveras County District Attorney
Bad Check Restitution Program
PO Box 1480
San Andreas, CA 95249-1480

Barbara M. Yook
District Attorney



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*** 0217REG.WHT.004
3000000016 01.0000.0000 12/1



MATT TEST
PO BOX 12345
HUBBARD CA 97032

Office Hours: 9:00 a.m. - 5:00 p.m.

Date of Notice: 02/17/2012
Case #: 39156591

Page: 1

Thank you for providing information evidencing the check in question was written and passed by another person without your permission. We have updated our files. You should not receive any further Notices from this Office concerning this matter.

We are sorry you were victimized.

For additional tips on fighting back against identity theft, please see the Federal Trade Commission's website at <http://www.ftc.gov/bcp/edu/microsites/idtheft/>

or more information call (866)740-7234.

Thank you for your immediate attention to this matter.

Sincerely,

Barbara M. Yook
District Attorney



Calaveras County District Attorney
Bad Check Restitution Program
PO Box 1480
San Andreas, CA 95249-1480

Barbara M. Yook
District Attorney



21

CLASS RESERVATION REMINDER

*** 0217DUP.WHT.004
3000000010 01.0000.0000 4/1



JOHN Q PUBLIC
PO BOX 12345
LAKE ELSINORE CA 92530

Office Hours: 9:00 a.m. - 5:00 p.m.
Phone: (866)740-7234
Date of Notice: 02/17/2012
Case #: 39156591
Balance Due: \$288.63
Page: 1

Your Financial Accountability class is scheduled for Saturday, June 30, 2012. Please arrive before 8:00 AM. The class is scheduled to end at approximately 12:30 PM. You will need to bring this Notice and a pen or pencil to the class location listed below:

University of Phoenix
3590 North First Street
San Jose CA 95134
CLASS IS FROM 8:00-12:30
Rooms 108/109

REGISTRATION BEGINS AT 7:45. CLASS WILL BEGIN AT 8:00 SHARP
The doors to the class will open exactly at 8:00am

Directions:

Heading South on US-101 merge onto CA-237 East. Continue to North First Street exit. Keep left at the fork to continue toward N. 1st. Street. Turn left on N. 1st. Street.

Heading South on I-880, take exit 7 to merge onto W. Montague Expressway. Continue and turn right on 1st Street.

Other important information: Children and guests are not permitted in class. Payments are not accepted at class. Class registration begins at 7:45 AM and the class will start promptly at 8:00 AM. Students arriving late may not be admitted to class. Failure to attend your scheduled class will result in a \$25.00 rescheduling fee being added to your case.

Completion of the program is only valid if you comply with ALL Bad Check Restitution Program requirements, including paying your outstanding balance and attending class.

Our records indicate that you currently have an outstanding balance of \$288.63.

Thank you for your immediate response to this matter.



If you need assistance in accessing the facility where this class is being held, or need accessibility assistance while attending this class, please call us at (866)740-7234 to discuss your needs. Thank you.

To Make Payment/Schedule Class, call (866)740-7234 or www.checkprogram.com

Case Number: 99999999 Password: 99999999

PAYMENTS ACCEPTED: CREDIT & DEBIT CARDS, WESTERN UNION, MONEY ORDERS, OR CASHIER'S CHECK



Calaveras County District Attorney
Bad Check Restitution Program
PO Box 1480
San Andreas, CA 95249-1480

Barbara M. Yook
District Attorney

CLASS RESERVATION REMINDER

*** 0217DUP.WHT.004
3000000010 01.0000.0000 4/1

JOHN Q PUBLIC
PO BOX 12345
LAKE ELSINORE CA 92530

Office Hours: 9:00 a.m. - 5:00 p.m.
Phone: (866)740-7234
Date of Notice: 02/17/2012
Case #: 39156591
Balance Due: \$288.63
Page: 2

The Calaveras County District Attorney's Bad Check Restitution Program is administered by a private entity under contract with the Calaveras County District Attorney.

 If you need assistance in accessing the facility where this class is being held, or need accessibility assistance while attending this class, please call us at (866)740-7234 to discuss your needs. Thank you.

To Make Payment/Schedule Class, call (866)740-7234 or www.checkprogram.com

Case Number: 99999999 Password: 99999999

PAYMENTS ACCEPTED: CREDIT & DEBIT CARDS, WESTERN UNION, MONEY ORDERS, OR CASHIER'S CHECK



Calaveras County District Attorney
Bad Check Restitution Program
PO Box 1480
San Andreas, CA 95249-1480

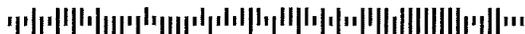
Barbara M. Yook
District Attorney



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CLASS CANCELLED

*** 0217REG.WHT.004
3000000017 01.0000.0000 13/1



JOHN Q PUBLIC
PO BOX 12345
LAKE ELSINORE CA 92530

Office Hours: 9:00 a.m. - 5:00 p.m.
Phone: (866)740-7234
Date of Notice: 02/17/2012
Case #: 39156591
Balance Due: \$288.63
Page: 1

The Financial Accountability class has been cancelled. We apologize for any inconvenience this may cause you. Please contact this Office at (866)740-7234 to reschedule.

Our records indicate that you currently have an outstanding balance of \$288.63.

You are scheduled to attend the Financial Accountability class on Saturday, June 30, 2012.

If you fail to cancel your scheduled class without 48 hours notice or cancel subsequent classes, you may be required to pay \$25.00 rescheduling fee for each occurrence. Successful completion of the program requires that you comply with all Bad Check Restitution Program requirements including full payment of restitution and all program fees and attendance of the Financial Accountability class. You may receive further notices and/or phone calls while program requirements remain outstanding.

Completion of the Program is only valid if you comply with ALL Bad Check Restitution Program requirements, including paying your outstanding balance and attending class.

The Calaveras County District Attorney's Bad Check Restitution Program is administered by a private entity under contract with the Calaveras County District Attorney.

To Make Payment/Schedule Class, call (866)740-7234 or www.checkprogram.com

Case Number: 99999999 Password: 99999999

PAYMENTS ACCEPTED: CREDIT & DEBIT CARDS, WESTERN UNION, MONEY ORDERS, OR CASHIER'S CHECK



Calaveras County District Attorney
Bad Check Restitution Program
PO Box 1480
San Andreas, CA 95249-1480

Barbara M. Yook
District Attorney



23

CHANGE OF CLASS DATE

*** 0217DUP.WHT.004
3000000011 01.0000.0000 5/1



JOHN Q PUBLIC
PO BOX 12345
HUNTINGTON BEACH CA 92648

Office Hours: 9:00 a.m. - 5:00 p.m.
Phone: (866)740-7234
Date of Notice: 02/17/2012
Case #: 39156591
Balance Due: \$288.63
Page: 1

The date of the Financial Accountability class has been changed. The new date is Saturday, June 30, 2012, at 7:45 AM. Please arrive before 7:45 AM. The class is scheduled to end at approximately 12:30 PM. You will need to bring this Notice and a pen or pencil to the class listed below:

University of Phoenix
3590 North First Street
San Jose CA 95134
CLASS IS FROM 8:00-12:30
Rooms 108/109

REGISTRATION BEGINS AT 7:45. CLASS WILL BEGIN AT 8:00 SHARP
The doors to the class will open exactly at 8:00am

Directions:

Heading South on US-101 merge onto CA-237 East. Continue to North First Street exit. Keep left at the fork to continue toward N. 1st. Street. Turn left on N. 1st. Street.

Heading South on I-880, take exit 7 to merge onto W. Montague Expressway. Continue and turn right on 1st Street.

Other important information: Children and guests are not permitted in class. Payments are not accepted at class. Class registration begins at 7:45 AM and the class will start promptly at 8:00 AM. Students arriving late may not be admitted to class. Failure to attend your scheduled class will result in a \$25.00 rescheduling fee being added to your case.

Completion of the Program is only valid if you comply with ALL Bad Check Restitution Program requirements, including paying your outstanding balance and attending class.

Our records indicate that you currently have an outstanding balance of \$288.63.

Should you be unable to attend on this date, please call this Office at (866)740-7234 to reschedule.



If you need assistance in accessing the facility where this class is being held, or need accessibility assistance while attending this class, please call us at (866)740-7234 to discuss your needs. Thank you.

To Make Payment/Schedule Class, call (866)740-7234 or www.checkprogram.com

Case Number: 99999999 Password: 99999999

PAYMENTS ACCEPTED: CREDIT & DEBIT CARDS, WESTERN UNION, MONEY ORDERS, OR CASHIER'S CHECK



Calaveras County District Attorney
Bad Check Restitution Program
PO Box 1480
San Andreas, CA 95249-1480

Barbara M. Yook
District Attorney

CHANGE OF CLASS DATE

*** 0217DUP.WHT.004
3000000011 01.0000.0000 5/1

JOHN Q PUBLIC
PO BOX 12345
HUNTINGTON BEACH CA 92648

Office Hours: 9:00 a.m. - 5:00 p.m.
Phone: (866)740-7234
Date of Notice: 02/17/2012
Case #: 39156591
Balance Due: \$288.63
Page: 2

The Calaveras County District Attorney's Bad Check Restitution Program is administered by a private entity under contract with the Calaveras County District Attorney.

 If you need assistance in accessing the facility where this class is being held, or need accessibility assistance while attending this class, please call us at (866)740-7234 to discuss your needs. Thank you.

To Make Payment/Schedule Class, call (866)740-7234 or www.checkprogram.com

Case Number: 99999999 Password: 99999999

PAYMENTS ACCEPTED: CREDIT & DEBIT CARDS, WESTERN UNION, MONEY ORDERS, OR CASHIER'S CHECK



Calaveras County District Attorney
Bad Check Restitution Program
PO Box 1480
San Andreas, CA 95249-1480

Barbara M. Yook
District Attorney



24

CLASS LOCATION CHANGE

*** 0217DUP.WHT.004
3000000012 01.0000.0000 6/1



JOHN Q PUBLIC
PO BOX 12345
BETHLEHEM CA 18020

Office Hours: 9:00 a.m. - 5:00 p.m.
Phone: (866)740-7234
Date of Notice: 02/17/2012
Case #: 39156591
Balance Due: \$288.63
Page: 1

The location for the Financial Accountability class scheduled for Saturday, June 30, 2012, has been changed. The new address and directions are listed below. Please arrive before 7:45 AM. The class is scheduled to end at approximately 12:30 PM. You will need to bring this Notice and a pen or pencil to class.

University of Phoenix
3590 North First Street
San Jose CA 95134
CLASS IS FROM 8:00-12:30
Rooms 108/109

REGISTRATION BEGINS AT 7:45. CLASS WILL BEGIN AT 8:00 SHARP
The doors to the class will open exactly at 8:00am

Directions:

Heading South on US-101 merge onto CA-237 East. Continue to North First Street exit. Keep left at the fork to continue toward N. 1st. Street. Turn left on N. 1st. Street.

Heading South on I-880, take exit 7 to merge onto W. Montague Expressway. Continue and turn right on 1st Street.

Other important information: Children and guests are not permitted in class. Payments are not accepted at class. Class registration begins at 7:45 AM and the class will start promptly at 8:00 AM. Students arriving late may not be admitted to class. Failure to attend your scheduled class will result in a \$25.00 rescheduling fee being added to your case.

Completion of the program is only valid if you comply with ALL Bad Check Restitution Program requirements, including paying your outstanding balance and attending class.

Our records indicate that you currently have an outstanding balance of \$288.63.

Thank you for your immediate response to this matter.



If you need assistance in accessing the facility where this class is being held, or need accessibility assistance while attending this class, please call us at (866)740-7234 to discuss your needs. Thank you.

To Make Payment/Schedule Class, call (866)740-7234 or www.checkprogram.com

Case Number: 99999999 Password: 99999999

PAYMENTS ACCEPTED: CREDIT & DEBIT CARDS, WESTERN UNION, MONEY ORDERS, OR CASHIER'S CHECK



Calaveras County District Attorney
Bad Check Restitution Program
PO Box 1480
San Andreas, CA 95249-1480

Barbara M. Yook
District Attorney

CLASS LOCATION CHANGE

*** 0217DUP.WHT.004
3000000012 01.0000.0000 6/1

JOHN Q PUBLIC
PO BOX 12345
BETHLEHEM CA 18020

Office Hours: 9:00 a.m. - 5:00 p.m.
Phone: (866)740-7234
Date of Notice: 02/17/2012

Page: 2

The Calaveras County District Attorney's Bad Check Restitution Program is administered by a private entity under contract with the Calaveras County District Attorney.

 If you need assistance in accessing the facility where this class is being held, or need accessibility assistance while attending this class, please call us at (866)740-7234 to discuss your needs. Thank you.

To Make Payment/Schedule Class, call (866)740-7234 or www.checkprogram.com

Case Number: 99999999 Password: 99999999

PAYMENTS ACCEPTED: CREDIT & DEBIT CARDS, WESTERN UNION, MONEY ORDERS, OR CASHIER'S CHECK



Calaveras County District Attorney
Bad Check Restitution Program
PO Box 1480
San Andreas, CA 95249-1480

Barbara M. Yook
District Attorney

HOME STUDY INSTRUCTIONS

*** 0217here.WHT.004
3000000007 01.0000.0000 5/1



JOHN Q PUBLIC
PO BOX 12345
VISALIA CA 93277

Office Hours: 9:00 a.m. - 5:00 p.m.
Phone: (866)740-7234
Date of Notice: 02/17/2012
Case #: 39156591
Balance Due: \$288.63
Page: 1

Enclosed please find your Checks and Balances Home Study Program. To satisfy the educational requirement of the Bad Check Restitution Program, you must complete the enclosed materials and successfully pass the Exit Test.

There are three options for taking the Home Study Program Exit Test:

- 1. ONLINE www.checkprogram.com
Case Number: 999999
Password: 999999
- 2. FAX Complete the Exit Test and Program Evaluation on pages 46-48 and fax them to (866)434-5614.
- 3. MAIL Complete the Exit Test and Program Evaluation on pages 46-48 and return those pages to the address listed on this notice.

Should you have any questions in completing the Home Study Program, please call (800)601-6637. Successful completion of the program requires that you comply with all Bad Check Restitution Program requirements including full restitution, all fees and passing the Home Study Exit Test.

Our records indicate that you currently have an outstanding balance of \$288.63.

The Calaveras County District Attorney's Bad Check Restitution Program is administered by a private entity under contract with the Calaveras County District Attorney.

To Make Payment/Schedule Class, call (866)740-7234 or www.checkprogram.com

Case Number: 99999999 Password: 99999999

PAYMENTS ACCEPTED: CREDIT & DEBIT CARDS, WESTERN UNION, MONEY ORDERS, OR CASHIER'S CHECK



Calaveras County District Attorney
Bad Check Restitution Program
PO Box 1480
San Andreas, CA 95249-1480

Barbara M. Yook
District Attorney

26

EDICION DE ESTUDIO PERSONAL

*** 0217here.WHT.004
3000000008 01.0000.0000 6/1



JOHN Q PUBLIC
PO BOX 12345
LOS ANGELES CA 90006

Office Hours: 9:00 a.m. - 5:00 p.m.
Phone: (866)740-7234
Date of Notice: 02/17/2012
Case #: 39156591
Balance Due: \$288.63
Page: 1

Includio encontrara su Edicion de Estudio Personal de Cheques y Balances. El libreto debe ser completado y enviado a la direccion indicada en su libreto dentro de tres semanas.

Si usted tiene preguntas o necesita ayuda en llenar el libreto, favor de llamar al (800)830-6589 y pida dejar un recado a un instructor de clase. Uno de nuestros instructores le regresara su llamada para contestar sus preguntas. Recuerde que tiene que completar y regresar el libreto y pagar su caso por completo para poder satisfacer los requisitos del District Attorney Bad Check Restitution Program.

Nuestros records indican que usted tiene un balance de \$288.63.

Sincerely,

Barbara M. Yook
District Attorney

El Programa De Restitucion de Malos Cheques del Calaveras County District Attorney es administrado por una entidad privada contratado por el Calaveras County District Attorney.

To Make Payment/Schedule Class, call (866)740-7234 or www.checkprogram.com

Case Number: 99999999 Password: 99999999

PAYMENTS ACCEPTED: CREDIT & DEBIT CARDS, WESTERN UNION, MONEY ORDERS, OR CASHIER'S CHECK



Calaveras County District Attorney
Bad Check Restitution Program
PO Box 1480
San Andreas, CA 95249-1480

Barbara M. Yook
District Attorney



27

NOTICE OF FAILURE TO COMPLY

*** 0217REG.WHT.004
3000000018 01.0000.0000 14/1



JOHN Q PUBLIC
PO BOX 12345
BURBANK CA 91505

Office Hours: 9:00 a.m. - 5:00 p.m.
Phone: (866)740-7234
Date of Notice: 02/17/2012
Case #: 39156591
Balance Due: \$288.63
Page: 1

Our records indicate you have not completed your Financial Accountability class requirement. To enroll in the next available class contact this Office at (866)740-7234 or go to our secure website at www.checkprogram.com. To access your case online you will need to enter your case number, which is 999999, and the following password: 999999.

Our records indicate that you currently have an outstanding balance of \$288.63.

Successful completion of the program requires that you comply with all Bad Check Restitution Program requirements including full restitution, all fees and attendance of the Financial Accountability class. You may receive further notices and/or phone calls while program requirements remain outstanding.

If you have already completed the class portion of the Bad Check Restitution Program, please call to inform this Office when this action was taken, or send a copy of your class attendance certificate to:

Fax: (800)227-3041

Calaveras County District Attorney
Bad Check Restitution Program
PO Box 1480
San Andreas, CA 95249-1480

If you have any questions regarding this notice, please call (866)740-7234.

The Calaveras County District Attorney's Bad Check Restitution Program is administered by a private entity under contract with the Calaveras County District Attorney.

To Make Payment/Schedule Class, call (866)740-7234 or www.checkprogram.com

Case Number: 99999999 Password: 99999999

PAYMENTS ACCEPTED: CREDIT & DEBIT CARDS, WESTERN UNION, MONEY ORDERS, OR CASHIER'S CHECK



Calaveras County District Attorney
Bad Check Restitution Program
 PO Box 1480
 San Andreas, CA 95249-1480

Barbara M. Yook
 District Attorney

Office Hours: 9:00 a.m. - 5:00 p.m.

RECEIPT OF CRIME REPORT

*** 0217DUP.WHT.004
 3000000013 01.0000.0000 7/1



Phone: (866)382-9310
 Date: 02/17/2012

WAL*MART
 ATTN: CASH OFFICE
 1550 S REDWOOD ROAD
 BENTONVILLE AR 72712

Page: 1

Thank you for submitting the following report(s) of bad check activity(s) to our office:

Safeway Ref #	Check Writer Name	Check #	Amount	Exhibit #
848484848	MARY'S FLOWER SHOPPE	4530	\$67.38	123456
Total checks received:		1	\$67.38	

An exhibit number has been assigned to each check. Please use the exhibit number when corresponding with our office.

These cases will receive our full attention immediately. Typically, the recovery cycle takes up to 120 days and in some cases longer. While we endeavor to recover on all bad checks, and are generally very successful, some cases are unable to be resolved. We will inform you if the status of your exhibit(s) changes.

You can also get status information any time by using our Interactive Phone System at (866)382-9310 or by visiting our secure website at:

www.checkprogram.com
 User name: 999999
 Password: 999999

Should the check writer attempt to contact you for payment, please direct them to the Bad Check Restitution Program at (866)740-7234.

We appreciate your keeping our community safer by participating in and referring checks to the Bad Check Restitution Program. If you have any questions regarding the exhibit(s) you have filed, please contact us at (866)382-9310.

Sincerely,

Barbara M. Yook
 District Attorney



Calaveras County District Attorney
Bad Check Restitution Program
PO Box 1480
San Andreas, CA 95249-1480

Barbara M. Yook
District Attorney

*** 0217here.WHT.004
3000000009 01.0000.0000 7/1



WAL*MART
ATTN: CASH OFFICE
1550 S REDWOOD ROAD
BENTONVILLE AR 72712

Office Hours: 9:00 a.m. - 5:00 p.m.
Phone: (866)382-9310
Date of Notice: 02/17/2012

Page: 1

Check writer: John Smith
Reference: 999999
Exhibit No: 999999

We regret that we are unable to pursue the enclosed bad check crime report as a criminal case for the reason(s) marked below:

We require that checks be submitted within 12 months of the date of acceptance. Please pursue the check writer CIVILLY.

The amount of the check submitted exceeds our Program's MISDEMEANOR limits of \$2,500.00. Submit this case directly to local law enforcement for investigation.

Case involves a stolen, forged, or counterfeit check. Please submit this case directly to local law enforcement for investigation.

Original checks needs to be attached to the form.

Partial payment was accepted prior to filing.

All checks must be processed through your bank indicating status of item (NSF etc.). Please re-submit crime report after processing by bank.

Payroll, Stop Payment, Rent, or Two-Party checks should be pursued CIVILLY. We recommend contacting the local small claims court for information on your case.

Other: _____

Sincerely,

Victim Services



Calaveras County District Attorney
Bad Check Restitution Program
PO Box 1480
San Andreas, CA 95249-1480

Barbara M. Yook
District Attorney



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CRIME REPORT STATUS UPDATE

*** 0217REG.WHT.004
3000000019 01.0000.0000 15/1



WAL*MART
ATTN: CASH OFFICE
1550 S REDWOOD ROAD
BENTONVILLE AR 72712

Office Hours: 9:00 a.m. - 5:00 p.m.

Phone: (866)382-9310

Date of Notice: 02/17/2012

Page: 1

Regretfully, we are unable to pursue the Crime Report listed below as a Bad Check case.

Check writer: John Smith

Reference: 999999

Check #: 4530

Amount: \$67.38

Date: 10/29/2011

Exhibit #: 999999

This is the result of the following:

Check involves a performance dispute over a product or service and/or the check was a stop payment.

You may still be able to file the Crime Report in Small Claims Court.

Please contact this Office at (866)382-9310 within two weeks if you wish to have your check(s) returned for such action as you deem appropriate.

Sincerely,

Victim Services



Calaveras County District Attorney
Bad Check Restitution Program
PO Box 1480
San Andreas, CA 95249-1480

Barbara M. Yook
District Attorney



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CRIME REPORT STATUS UPDATE

*** 0217REG.WHT.004
3000000020 01.0000.0000 16/1



WAL*MART
ATTN: CASH OFFICE
1550 S REDWOOD ROAD
BENTONVILLE AR 72712

Office Hours: 9:00 a.m. - 5:00 p.m.
Phone: (866)382-9310
Date of Notice: 02/17/2012

Page: 1

Regretfully, we are unable to pursue the Crime Report listed below as a Bad Check case.

Check writer: John Smith
Reference: 999999
Check #: 4530
Amount: \$67.38
Date: 10/29/2011
Exhibit #: 999999

This is the result of the following:

The Statute of Limitations for filing a criminal case has expired or there is insufficient time remaining to complete an investigation prior to the passing of that date.

Please contact this Office at (866)382-9310 within two weeks if you wish to have your check(s) returned for such action as you deem appropriate.

Sincerely,

Victim Services



Calaveras County District Attorney
Bad Check Restitution Program
PO Box 1480
San Andreas, CA 95249-1480

Barbara M. Yook
District Attorney



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CRIME REPORT STATUS UPDATE

*** 0217REG.WHT.004
3000000021 01.0000.0000 17/1



WAL*MART
ATTN: CASH OFFICE
1550 S REDWOOD ROAD
BENTONVILLE AR 72712

Office Hours: 9:00 a.m. - 5:00 p.m.
Phone: (866)382-9310
Date of Notice: 02/17/2012
Case #: 39156591

Page: 1

Regretfully, we are unable to pursue the Crime Report listed below as a Bad Check case.

Check writer: John Smith
Reference: 999999
Check #: 4530
Amount: \$67.38
Date: 10/29/2011
Exhibit #: 999999

This is the result of the following:

Check involves a lost, stolen, or forged check. We recommend you file a complaint with your local law enforcement agency. We will make available the information we received upon request.

Please contact this Office at (866)382-9310 within two weeks if you wish to have your check(s) returned for such action as you deem appropriate.

Sincerely,

Victim Services



Calaveras County District Attorney
Bad Check Restitution Program
PO Box 1480
San Andreas, CA 95249-1480

Barbara M. Yook
District Attorney



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CRIME REPORT STATUS UPDATE

*** 0217REG.WHT.004
3000000022 01.0000.0000 18/1



WAL*MART
ATTN: CASH OFFICE
1550 S REDWOOD ROAD
BENTONVILLE AR 72712

Office Hours: 9:00 a.m. - 5:00 p.m.
Phone: (866)382-9310
Date of Notice: 02/17/2012
Case #: 39156591

Page: 1

Regretfully, we are unable to pursue the Crime Report listed below as a Bad Check case.

Check writer: John Smith
Reference: 999999
Check #: 4530
Amount: \$67.38
Date: 10/29/2011
Exhibit #: 999999

This is the result of the following:

Check writer filed bankruptcy and this matter was discharged by a bankruptcy court. We recommend you contact the United States Bankruptcy Court nearest you for further information.

Please contact this Office at (866)382-9310 within two weeks if you wish to have your check(s) returned for such action as you deem appropriate.

Sincerely,

Victim Services



Calaveras County District Attorney
Bad Check Restitution Program
PO Box 1480
San Andreas, CA 95249-1480

Barbara M. Yook
District Attorney



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PROOF OF PAYMENT

*** 0217REG.WHT.004
3000000023 01.0000.0000 19/1



WAL*MART
ATTN: CASH OFFICE
1550 S REDWOOD ROAD
BENTONVILLE AR 72712

Office Hours: 9:00 a.m. - 5:00 p.m.
Phone: (866)382-9310
Date of Notice: 02/17/2012
Case #: 39156591

Page: 1

You have filed a crime report with our Office against the following individual:

Check Writer: John Smith
Reference: 999999
Check No: 4530
Amount: \$67.38
Date: 10/29/2011

This person claims to have made a prior payment to you in this matter. To resolve this issue, kindly provide the following information:

Date payment received: _____

Payment Amount: _____

Additional comments: _____

In an effort to resolve this matter in a timely manner, we ask that you respond to this request within 10 days. If no response is received, we will assume that the payment in question has in fact been made and apply the payment to the check case that you filed with the Program.

You may either fax a copy of this letter to (888) 298-0506, or provide the information over the telephone by calling (866)382-9310, or return this form to the address listed at the top of the letter c/o the Victim Services Department

Sincerely,

Victim Services



Calaveras County District Attorney
Bad Check Restitution Program
PO Box 1480
San Andreas, CA 95249-1480

Barbara M. Yook
District Attorney

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REQUEST FOR DOCUMENTS

*** 0217here.WHT.004
3000000010 01.0000.0000 8/1



WAL*MART
ATTN: CASH OFFICE
1550 S REDWOOD ROAD
BENTONVILLE AR 72712

Office Hours: 9:00 a.m. - 5:00 p.m.
Phone: (866)382-9310
Date of Notice: 02/17/2012

Page: 1

The check writer below has ignored this Office's requests for payment of restitution.

Suspect: John Smith
Ref: 999999
Check #: 4530
Amount: \$67.38
Date: 10/29/2011
Exhibit #: 999999

This case has been preliminarily selected for further review for prosecution. In order to proceed with the review, we need the following information:

- Original check or legal copy if the original check is unavailable.
- Certified mail return receipt.
- Documentation of attempts to contact check writer.
- Other: _____

Please also verify the name, address and other information for the person who accepted this check:

Name: _____

Address: _____

Phone Number: _____

Is this person still employed by you? Yes / No

Can this person identify the check writer? Yes / No

Is this person willing to testify in court that he/she can identify the check writer? Yes / No



Calaveras County District Attorney
Bad Check Restitution Program
PO Box 1480
San Andreas, CA 95249-1480

Barbara M. Yook
District Attorney

REQUEST FOR DOCUMENTS

*** 0217here.WHT.004
3000000011 01.0000.0000 8/2

WAL*MART
ATTN: CASH OFFICE
1550 S REDWOOD ROAD
BENTONVILLE AR 72712

Office Hours: 9:00 a.m. - 5:00 p.m.
Phone: (866)382-9310
Date of Notice: 02/17/2012

Page: 2

Please return this information to our office within 15 days of the date of this letter c/o Case Management Department. If we do not hear from you within the requested timeframe, this case will be archived with an inactive status in our office.

Should the check writer attempt to contact you for payment, please direct them to the Bad Check Restitution Program at (866)740-7234.

If you have any questions regarding this case, please contact our office at (866)382-9310.

Sincerely,

A handwritten signature in cursive script that reads "Barbara M. Yook".

Barbara M. Yook
District Attorney



Calaveras County District Attorney
Bad Check Restitution Program
PO Box 1480
San Andreas, CA 95249-1480

Barbara M. Yook
District Attorney



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FORWARDED FOR PROSECUTION REVIEW

*** 0217REG.WHT.004
3000000024 01.0000.0000 20/1



WAL*MART
ATTN: CASH OFFICE
1550 S REDWOOD ROAD
BENTONVILLE AR 72712

Office Hours: 9:00 a.m. - 5:00 p.m.

Date of Notice: 02/17/2012

Page: 1

This letter is to inform you that the Crime Report listed below has been forwarded for prosecution review.

Suspect: John Smith
Ref: 999999
Check #: 4530
Amount: \$67.38
Date: 10/29/2011
Exhibit #: 999999

You will be contacted when restitution arrangements have been approved by the court. Please understand that this Office has no way of predicting when such action may occur.

In the event we are able to recover restitution, we will mail you a check for the amount recovered.

Should the check writer attempt to contact you for payment, please direct them to the Bad Check Restitution Program at (866)382-9310.

Sincerely,

Barbara M. Yook
District Attorney



Calaveras County District Attorney
Bad Check Restitution Program
PO Box 1480
San Andreas, CA 95249-1480

Barbara M. Yook
District Attorney



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UNABLE TO PROSECUTE

*** 0217REG.WHT.004
3000000025 01.0000.0000 21/1



WAL*MART
ATTN: CASH OFFICE
1550 S REDWOOD ROAD
BENTONVILLE AR 72712

Office Hours: 9:00 a.m. - 5:00 p.m.
Phone: (866)382-9310
Date of Notice: 02/17/2012

Page: 1

After careful review of all the evidence, the District Attorney has determined that we are unable to prosecute the following Crime Report:

Check writer: John Smith
Reference: 999999
Check #: 4530
Amount: \$67.38
Date: 10/29/2011
Exhibit #: 999999

In cases where the check writer fails to make restitution, the District Attorney attempts to build a case. Typically, this process involves documenting criminal intent to defraud based upon evidence obtained. It is our hope that any future Crime Report submitted to this Office will result in either full recovery of restitution, or a criminal filing.

You may still be able to file the Crime Report in Small Claims Court.

Please contact this Office at (866)382-9310 within two weeks if you wish to have your check(s) returned for such action as you deem appropriate.

Sincerely,

Victim Services



Calaveras County District Attorney
Bad Check Restitution Program
PO Box 1480
San Andreas, CA 95249-1480

Barbara M. Yook
District Attorney

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*** 0217here.WHT.004
3000000012 01.0000.0000 9/1



WAL*MART
ATTN: CASH OFFICE
1550 S REDWOOD ROAD
BENTONVILLE AR 72712

Office Hours: 9:00 a.m. - 5:00 p.m.
Phone: (866)382-9310
Date of Notice: 02/17/2012

Page: 1

Dear John Smith,

Thank you for your support of the Bad Check Restitution Program. Your participation helps our community remain a safe and a growing place for business.

We have included a Crime Report that you can return to our office. Filling out this form is the first and only step you need to take advantage of this free program offered by the District Attorney.

This program is a no-cost, taxpayer-free public service designed to help you recover your losses and protect your business from bad check writers.

After filling out the Crime Report, you can mail it to our office at:

Calaveras County District Attorney
Bad Check Restitution Program
PO Box 1480
San Andreas, CA 95249-1480

Please feel free to make multiple copies of the attached Crime Report as you may submit as many bad checks passed to your business. You may also visit our website www.checkprogram.com/calaverascountyca to download a Crime Report or for additional program information.

After submitting the Crime Report, we will contact the check writer and forward the recovered restitution to your business address. Additionally, the check writer must attend a half-day seminar on financial and community responsibility.

If you would like to request additional information, you can contact a program representative by sending an email to Calaverasca@checkprogram.com or by calling our Victim Hotline at (866)382-9310.

Again, we appreciate your support of the Program and encourage your continued participation so that together, we can stop bad check crimes.

Calaveras County District Attorney



Calaveras County District Attorney
Bad Check Restitution Program
PO Box 1480
San Andreas, CA 95249-1480

Barbara M. Yook
District Attorney



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Request for Information

*** 0217REG.WHT.004
3000000026 01.0000.0000 22/1



BANK OF AMERICA
PO BOX 1234
WESTMINSTER CA 92684

Date of Notice: 02/17/2012
Case #: 39156591

Page: 1

Fax: (800) 227-3041

Attn: Legal Order Processing

Account name: John Smith /
Account number: 22222222
Complaint number: 999999

This office certifies under penalty of perjury that an investigation is being conducted into a crime report which alleges the fraudulent use of checks on the above checking account, occurring on 10/29/2011. We are requesting a statement setting forth the following information with respect to a customer's account. This request is for a period 30 days prior to, and continuing 30 days after, the date of occurrence of the alleged illegal act(s) involving the account. This request is made under the authority of Government Code 7480(b).

The following information is requested under Government Code 7480(b).

1. The number of items dishonored.
2. The number of items paid which created overdrafts.
3. (a) The dollar volume of the dishonored item(s) and item(s) paid which created overdraft(s).
(b) A statement explaining any credit arrangement between the bank, credit union, or savings and loan association and customer to pay overdrafts.
4. (a) The date(s) and amount(s) of each deposit and each debit.
(b) The account balance on each of these date(s).
5. A copy of the signature and any addresses appearing on the customer's signature card.
6. The date the account opened and if applicable, the date the account closed.

Please print name: _____

Phone number: _____

Signature of person completing this request: _____

We greatly appreciate your cooperation in this matter. If you have any questions, please contact our office at (866)382-9310 Ext. 143.

PLEASE SUBMIT COMPLETE BANK STATEMENTS AND DO NOT REDACT ANY INFORMATION AS IT WILL IMPEDE OUR CRIMINAL INVESTIGATION.

— EXHIBIT 2 —

ORIGINAL

ADMINISTRATIVE SUPPORT

SERVICES AGREEMENT

NO. 235-S1410

This Administrative Support Services Agreement (the "Agreement") between National Corrective Group, Inc., a Delaware corporation, doing business as CorrectiveSolutions and the District Attorney of El Dorado County, State of California ("District Attorney"):

Recitals

- (i) The District Attorney and CorrectiveSolutions have expressed interest in entering into this Agreement on the terms contained herein, and such terms shall remain valid and in effect for thirty (30) days from the date of execution by CorrectiveSolutions ("Courtesy Period") and will expire after the Courtesy Period if the Agreement is not jointly executed by the parties within the Courtesy Period.
- (ii) The principal business activity of CorrectiveSolutions is the provision of educational seminars and administrative support services to State and Judicial District prosecutors' offices that have adopted a bad check diversion program. These programs typically allow alleged bad check offenders (the "Participants") to avoid the prospect of criminal prosecution, provided the Participant attends an educational seminar ("Seminar") mandated by the prosecutorial authority addressing the causes and the prevention of bad check writing, in addition, each Participant must pay a mandatory fee for the Seminar and full restitution to the victim of the bad check. For purposes of this Agreement a check shall be defined as any physical or electronic account draft or as per the Check Clearing for 21st Century Act section 3(6): a draft, payable on demand and drawn on or payable through or at an office of a bank, whether or not negotiable, that is handled for forward collection or return, including a substitute check and a travelers check ("Check").
- (iii) CorrectiveSolutions has extensive experience providing administrative support and Seminars for diversion programs. CorrectiveSolutions has developed proprietary Seminar materials for conducting Seminars, including extensive experience in staffing diversion program Seminars, and has acquired substantial knowledge with respect to the administrative and record management procedures necessary to administer an effective diversion program.
- (iv) The District Attorney desires to provide a diversion program for Participants, consistent with and pursuant to Section 801 of The Financial Services Regulatory Relief Act of 2006, 15 U.S.C. § 1692p ("The Act"), and any applicable state law and desires to retain CorrectiveSolutions as a duly authorized agent to provide administrative support services, to staff and to administer its District Attorney diversion program Seminars, and to provide administrative support services as reasonably required by the District Attorney in conducting its diversion program ("Diversion Program"). To the extent that CorrectiveSolutions employees have any interaction with Participants other than with respect to Seminar-related activities, CorrectiveSolutions employees shall exercise only ministerial, non-discretionary duties, at all times subject to the management and control of the District Attorney. CorrectiveSolutions desires to perform these services for the District Attorney as specified herein.

El Dorado County, CA
Page 2 of 9

NOW THEREFORE, THE PARTIES AGREE AS FOLLOWS:

1. Retention of Services. The District Attorney retains the services of CorrectiveSolutions as described herein, and CorrectiveSolutions agrees to perform in accordance with this Agreement.

2. Term. The term of this Agreement is three years and shall cover the period of September 24, 2013 through September 23, 2016, commencing upon execution of this Agreement by both parties, and unless sooner terminated as provided herein.

3. Name, Authority, and Control. The District Attorney has determined that no El Dorado County funds are required to operate and maintain the Diversion Program and is duly authorized to create a Diversion Program per California Penal Code 1001.60 and as such no adoption of a resolution is required by the board of supervisors to declare that there are sufficient funds available to fund the program:

(a) the District Attorney retains full prosecutorial discretion and does not delegate to CorrectiveSolutions any aspect of the exercise of prosecutorial discretion and the District Attorney has deemed the Diversion Program to be in the best interest of its jurisdiction and in compliance with any applicable state statutory or common law and in compliance with The Act;

(b) the content and frequency of the Seminars are to be approved by the District Attorney prior to the commencement of the Seminars;

(c) prerequisites for participation in the Diversion Program, including any requirement to pay full restitution to the victim, shall be established by the District Attorney and not by CorrectiveSolutions. The District Attorney shall determine if probable cause of a bad check violation exists under state penal law ("Bad Check Violation") and that contact with the alleged offender for purposes of participation in the Diversion Program is appropriate and consistent with The Act, as so required;

(d) the District Attorney retains the authority to contractually set or modify the Diversion Seminar fees and terms of payment from the Participants;

(e) the format, content, and frequency of any oral or written communication with Participants concerning the payment of restitution or Diversion Seminar Fees is to be approved in advance by the District Attorney, along with any future changes of material consequence to the communications materials;

(f) the mailing of all written communications to Participants concerning the payment of restitution or Diversion Seminar Fees is to be approved by the District Attorney prior to the mailing, and any such written communication will be either generated or mailed by District Attorney personnel, by a mailing service or similar clerical service, or fulfilled by CorrectiveSolutions under its assigned administrative responsibilities per this Agreement; and

(g) the mailing address to which Participants are directed to respond will be the District Attorney's mailing address and/or a post office box held in the District Attorney's name.

4. Services to Be Provided by CorrectiveSolutions.

(a) Seminars. CorrectiveSolutions will conduct all Diversion Program Seminars. In that regard, CorrectiveSolutions will provide qualified instructors to conduct the Seminars, provide its proprietary Seminar materials to Participants, lease the required facilities to conduct the Seminars,

El Dorado County, CA
Page 3 of 9

monitor the attendance at the Seminars, and communicate directly with Seminar Participants regarding scheduling, attendance, and related administrative details. Seminars shall be scheduled in convenient locations within or near El Dorado County and will be held as determined convenient and effective in serving Participants. Instructors will typically hold advanced degrees in a counseling related field (e.g., psychology or social work). CorrectiveSolutions will continue to develop and refine its Seminar curriculum and educational materials, and will conduct ongoing training and evaluation of all CorrectiveSolutions instructors. The Seminar is designed to eliminate or modify many of the behavioral rationalizations surrounding the writing of bad checks, as well as focus on deficiencies in the areas of personal finance, communication, and stress management. Seminar sizes will average from 20 to 30 Participants, based on Participant and instructor scheduling needs. A CorrectiveSolutions "Checks and Balances" personal study program (or equivalent future program) ("Personal Study Program") may also, as appropriate, be utilized in lieu of a live Seminars under certain circumstances, (e.g., if the Participant lives outside a reasonable distance from the Seminar site, a fully attended Seminar cannot be assembled on a scheduled date, etc.).

(b) Administrative Support. CorrectiveSolutions will provide the District Attorney with *pro forma* administrative forms and proposed procedural guidelines for the operation of the Diversion Program, which are to be reviewed, modified and approved by the District Attorney. CorrectiveSolutions will make its administrative personnel available to assist the District Attorney in the development of administrative procedures to be followed for the clerical and accounting functions of the Diversion Program. These procedures include the District Attorney's written communications to Participants, which may be updated from time to time by CorrectiveSolutions for administrative efficiencies, the mechanics of sorting the mail, depositing and accounting for Diversion Program Fees and restitution payments from Participants, disbursement of restitution payments to victims, and financial reporting. CorrectiveSolutions shall provide clerical personnel for administrative, accounting, and reporting aspects of the Diversion Program, subject at all times to the managerial authority of the District Attorney. More specifically, CorrectiveSolutions shall:

- (i) maintain thorough records to enable the generation of reports detailing the compliance and the disposition status on each Participant's case,
- (ii) maintain a detailed current accounting record of all receipts and disbursements of the Diversion Program,
- (iii) open and sort correspondence related to the Diversion Program and deposit restitution payments and Diversion Program Fees in a federally insured account to be held in trust for the District Attorney ("Account"),
- (iv) prepare monthly reports which shall provide a summary of transactions and Diversion Program activity for the period, and
- (v) maintain physical files, computer files, and facilities required for performance under this Agreement, and provide the necessary supplies and system access to enable the District Attorney to administer the Diversion Program.

5. Responsibilities of the District Attorney. The District Attorney shall establish the policies and procedures of the Diversion Program and instruct CorrectiveSolutions regarding the administrative requirements necessary for effective Diversion Program operation. The District Attorney shall establish eligibility criteria for all Participants in the Diversion Program and shall determine if probable cause of a Bad Check Violation exists under state penal law, and that contact with the alleged offender for purposes of participation in the Diversion Program is

El Dorado County, CA
Page 4 of 9

appropriate and consistent with The Act, as so required. This determination by the District Attorney shall be communicated to the Diversion Program via its authorized and approved intake, dispute resolution, and prosecution review criteria, established prior to the start of the Diversion Program and as these and other future required documents, as needed, may be added or updated from time to time by the District Attorney. The District Attorney shall also determine, consistent with state statutory law if applicable, specific Diversion Program completion criteria, and procedures regarding the management of cases for those individuals who fail to comply with Diversion Program requirements, including the payment of full restitution and Diversion Program Fees.

6. Designation of District Attorney's "Communications Liaison Officer." The District Attorney's office shall designate one of its properly authorized employees as the Communications Liaison Officer (the "Communications Officer"). The Communications Officer shall be charged with final approval, signature, and coordination of all written communications to Participants concerning the Diversion Program, except for those communications relating exclusively to conducting and scheduling of Seminars, which is the primary responsibility of CorrectiveSolutions. Furthermore, the Communications Officer shall authorize and supervise all communications with Participants concerning the terms and conditions of the Diversion Program, including directing the dispute process to comply with The Act, as so required, which will include a clear and conspicuous statement in the initial notice informing Participants that they have 30 days to dispute in writing the validity of any alleged Bad Check Violation ("Written Dispute"). The initial notice will also inform Participants of their various approved dispute options and requirements. CorrectiveSolutions shall adhere to the authorized dispute resolution criteria and shall forward any such unresolved Written Disputes to the Communications Officer, who will then provide, per The Act, explicit direction(s) as to how to resolve the dispute and whether such Participant has been further determined eligible for continued participation in the Diversion Program. CorrectiveSolutions shall be responsible for all communications with Participants regarding the conduct and scheduling of the Seminars, including attendance, location, rescheduling of Seminars, or other Seminar related matters. CorrectiveSolutions personnel shall direct any questions within the responsibility of the Communications Officer to the Communications Officer, and not discuss these issues with Participants.

7. Compensation to CorrectiveSolutions. CorrectiveSolutions is to be compensated from the proceeds of the Diversion Seminar Fees charged to the Participants, from CorrectiveSolutions' portion of the Administrative Fees (if any), and from Incidental Expense Fees (if any) charged to Participants for monitoring restitution, accounting costs associated with payment arrangements, and any other incidental costs authorized by law or the District Attorney. The authorized Diversion Seminar Fees, Administrative Fees (if any), and Incidental Expense Fees (if any) are set forth on Schedule 1 attached hereto.

8. Funds and Disbursements. Participants in the Diversion Program shall be instructed to remit payments: i) to a post office box maintained by the District Attorney, ii) over the phone and/or Internet, (e.g., via credit/debit card, ACH or other EFT type transaction), iii) via Western Union (or equivalent service provider), or iv) other payment methods that may be available in the future, after which monies shall be deposited in a federally insured Account. Disbursements from the Account shall be made on a regular cycle with the assistance of CorrectiveSolutions. A summary of all Account transactions shall be reported on a monthly basis, with supporting documentation made available for inspection upon request.

9. Records Subject to Audit. The Diversion Program books of accounts, records, and source documents shall be kept and made available at the request of the District Attorney with the cost of such presentation borne by CorrectiveSolutions. The District Attorney shall have the right to examine and audit the Diversion Program books and records and supporting source documents

El Dorado County, CA
Page 5 of 9

at any and all times. The cost of the audit shall be borne by CorrectiveSolutions if the audit shows an understatement of annual compensation of more than five percent (5%) of the annual compensation to the District Attorney's Office determined on audit, or the audit demonstrates a material failure of CorrectiveSolutions to maintain accurate and complete books, records, accounts, and supporting documentation. All Diversion Program physical and electronic records shall be retained for a period of not less than three (3) years, with records relating to any litigation, or settlement of claims arising out of performance of this contract being retained for a period of not less than four (4) years. CorrectiveSolutions reserves the right to digitize physical records into electronic files in complying with this requirement. In addition, CorrectiveSolutions reserves the right to destroy physical records once an electronic record is created.

10. Termination. Either party may terminate this Agreement without cause upon ninety (90) days written notice given to the other party. In the event of a termination, the District Attorney shall give CorrectiveSolutions written "wind down" instructions. CorrectiveSolutions shall comply with the termination instructions in a manner that is consistent with recognized standards of prudent business practice. Compensation to both parties will continue throughout the process of closing operations.

11. Confidentiality. CorrectiveSolutions acknowledges and agrees to implement reasonable safeguards to protect the confidentiality of information obtained in the course of the Diversion Program, including the identity and personal information of Participants, the identity of persons who file bad check crime reports with the District Attorney, and the operations of the District Attorney. The District Attorney agrees to protect all proprietary information CorrectiveSolutions provides in connection with the performance of this Agreement, including certain CorrectiveSolutions communications materials, teaching materials, instructional guidelines, financial condition, business plans, and technical information. The parties agree upon termination of this Agreement to refrain from using any proprietary or confidential information or materials unless such materials or information may become evidence in any criminal prosecution or civil action that affects El Dorado County of the State of California.

12. Insurance. CorrectiveSolutions will maintain Comprehensive General Liability Insurance including premises liability, bodily injury, and product/completed operations coverage with a combined single limit of \$1,000,000.00 per occurrence, with a \$2,000,000.00 aggregate. CorrectiveSolutions will maintain non-owned/hired automobile liability insurance in the amount of \$1,000,000.00 in aggregate. In reference to insurance coverage maintained by CorrectiveSolutions such policies shall not be canceled, limited in scope, or non-renewed until after thirty (30) days written notice has been given to the office of the District Attorney. Certificates of Insurance evidencing the above coverages and clauses shall be made available to the District Attorney's office upon request.

13. Status of CorrectiveSolutions Personnel. CorrectiveSolutions employees are and shall remain the employees of CorrectiveSolutions, not the District Attorney. CorrectiveSolutions shall maintain all necessary licenses, permits, certificates, and approvals required by the laws of the United States, California, and all other appropriate governmental agencies. Evidence of such licenses, permits, and approvals shall be made available to the District Attorney's office upon request. CorrectiveSolutions certifies that all policies regarding employment and participation in the Program are in writing and shall be made available to the District Attorney and members of the public upon request. The foregoing notwithstanding, CorrectiveSolutions employees, when performing the administrative support requirements of this Agreement, shall be subject to the managerial control of the District Attorney at all times with respect to any communications CorrectiveSolutions employees may have with Participants. To the extent that CorrectiveSolutions employees have any interaction with Participants other than with respect to Seminar-

El Dorado County, CA
Page 6 of 9

related activities, CorrectiveSolutions employees shall exercise only ministerial, non-discretionary duties, at all times subject to the management and control of the District Attorney.

14. Entire Agreement. This Agreement supersedes any and all other agreements, either oral or written, between the parties hereto with respect to the subject matter hereof, and contains all of the agreements between the parties with respect to said matter. Each party to this Agreement acknowledges that no representations, inducements, promises, or agreements, oral or otherwise, have been made by either party which are not embodied herein, and that no other agreements, statements, or promises not contained within this Agreement shall be valid or binding.

15. Attorneys' Fees. If a dispute arises with respect to this Agreement, the party prevailing in such dispute shall be entitled to recover all fees and expenses, including, without limitation, reasonable attorneys' fees and expenses, incurred in ascertaining such party's rights, or in preparing to enforce or in enforcing such party's rights under this Agreement, whether or not it was necessary for such party to institute suit.

16. Execution in Counterparts. This Agreement may be executed in several counterparts and when so executed shall constitute one agreement binding on all the parties, notwithstanding that all the parties are not signatory to the original and same counterpart.

17. Further Assurance. From time to time each party will execute and deliver such further instruments and will take such other action as the other party may reasonably request in order to discharge and perform their obligations and agreements hereunder and to give effect to the intentions expressed in this Agreement

SCHEDULE 1

- A. RESTITUTION:** The victim's total loss associated with the face value of all bad checks, plus a bank charge up to \$15.00 as per California Penal Code Section 1001.65(c).
- B. ADMINISTRATIVE FEE:** The amount of the fee shall not exceed \$50.00 per check authorized pursuant to California Penal Code Section 1001.65(a). These fees shall be utilized in offsetting program administrative expenses and paid in accordance with the Payment Disbursement Schedule below.
- C. DIVERSION SEMINAR FEE:** The Diversion Program shall require eligible Participants to pay a \$191 Diversion Seminar Fee ("Fee") for the current contract year of the Agreement, with a 3% annual increase thereafter (rounded to the nearest dollar) on each subsequent Agreement anniversary. No more than one class fee will be charged per Participant during a 12 month period. This Fee includes the opportunity to attend the Seminar or to complete a Personal Study Program where appropriate (which Seminar/ Personal Study Program times, dates, and curriculum may be updated from time to time by CorrectiveSolutions to better serve Participants and for administrative efficiencies).
- D. CONVENIENCE FEE:** Participants utilizing a method of payment outlined in Section 8 (ii) or (iv) will be assessed up to a \$10 convenience fee on each occasion applicable (which fee may be reasonably updated from time to time by CorrectiveSolutions). Any Convenience Fee shall be paid first and fully to CorrectiveSolutions to reimburse it for its processing fees and is not subject to the recovery and payment distribution schedule in the event of a partial payment.
- E. INCIDENTAL EXPENSE FEES:**
- 1. RESCHEDULING FEE:** Participants who fail to cancel their originally scheduled Seminar time without 48 hour advance notice or who fail to appear at their scheduled Seminar or who cancel any subsequently scheduled Seminars will be required to pay a \$25 rescheduling fee on each occasion applicable.
 - 2. PAYMENT FEE:** The Diversion Program shall require all Participants who have enrolled in a payment plan and miss their scheduled payment date (payment is postmarked more than five (5) days from the scheduled date or they underpay their payment plan amount) to pay a \$10 late fee on each occasion applicable to cover the additional administrative expense resulting from the failure to comply with the scheduled payment plan(s).
 - 3. OVERPAYMENT/HANDLING FEE:** All overpayment balances over \$5 shall be paid to the Participant(s) within ninety (90) days after all Program requirements have been satisfied, less a \$5 handling fee. All overpayments under \$5 shall be retained by CorrectiveSolutions.
- F. PROGRAM COSTS:** All direct costs to the District Attorney resulting from mail services, banking fees, postal box rental and related mail costs, shall be charged against and paid from CorrectiveSolutions' portion of the Administrative Fees. CorrectiveSolutions shall bear all costs related to its personnel, supplies, and expenses.

El Dorado County, CA
Page 9 of 9

- G. COMPENSATION:** CorrectiveSolutions shall receive 60% of the Administrative Fees and the District Attorney 40. CorrectiveSolutions shall also receive 100% of the Diversion Seminar, Incidental Expense, and Convenience Fees.
- H. PAYMENT DISBURSEMENT SCHEDULE:** Victim restitution receipts in prior months shall be disbursed by check (or other electronic transfer method per victim's request) to the victim no later than the 20th day of each month. CorrectiveSolutions' fees shall be disbursed weekly to CorrectiveSolutions (which frequency may be updated from time to time by CorrectiveSolutions as necessary). Bills for mail costs and postal box rentals shall be paid by CorrectiveSolutions according to vendor terms. The balance of the fees owed to the District Attorney for the prior month's receipts shall also be disbursed by the 20th day of each month.
- I. RECOVERY AND PAYMENT DISTRIBUTION:** Lump sum payments shall be distributed in their entirety according to the payment disbursement schedule under which victims are paid first. When partial payments are received, the following distribution priority shall be used: 50% of the partial payment is applied to the victim restitution balance (until satisfied). The remaining portion of the payment is applied first to the Diversion Seminar Fee and secondly to the Incidental Expense Fees (if any), and last to Administrative Fees (if any). In cases where there are multiple victims, restitution payments will be applied on a first-in first-out (FIFO) basis as determined by crime report filing date.

DISTRICT ATTORNEY
INITIAL HERE _____



— EXHIBIT 3 —



OFFICIAL NOTICE - IMMEDIATE ATTENTION REQUIRED

*** 0117DUP.BLU.001
4000000621 01.0000.0000 214/1



KEVIN J BREATZEALE
APT 152
37200 PASEO PADRE PKWY
FREMONT CA 94536-2575

Office Hours: 9:00 a.m. - 5:00 p.m.
Phone: (866)740-7398
Date of Notice: 01/17/2014
Case #: 42411526
Balance Due: \$730.00
Page: 1

You have been accused of violating California Penal Code 476a, entitled "Making or Delivering Check With Insufficient Funds". A conviction under this statute is punishable by up to one (1) year in the county jail for checks up to \$450, and county jail or state prison for checks in excess of \$450. See page 5 for details on the party(s) initiating this allegation.

My office has established a Bad Check Restitution Program. The Bad Check Restitution Program is authorized by the California legislature, and is a pre-charge program designed to allow people accused of having violated the above-referenced statute to avoid the possibility of further action against the accused by the District Attorney's Office. Participation in the Bad Check Restitution Program is voluntary. The Bad Check Restitution Program has two steps:

1. Pay all restitution on all reported checks, plus any administrative, returned item, and program fees.
2. Attend a Financial Accountability class.

Alameda County District Attorney Bad Check Restitution Program TOTAL BALANCE DUE: \$730.00

You have the right to dispute this matter, as set forth on page 2 of this notice. In order to participate in the Bad Check Restitution Program you must pay in full and schedule class within THIRTY (30) DAYS from the date of this Notice.

PLEASE CALL (866)740-7398 or visit www.checkprogram.com TO MAKE PAYMENT/SCHEDULE CLASS

Please have your case number ready: 42411526 and Password: 39632773
PAYMENTS ACCEPTED: CREDIT & DEBIT CARDS, WESTERN UNION, MONEY ORDERS, OR CASHIER'S CHECK

If you choose to participate in the Bad Check Restitution Program, and if you successfully complete the program's two steps outlined above, my office will consider this matter resolved. The Bad Check Restitution Program is administered by a private entity under contract with the Alameda County District Attorney.

For additional information or if you believe you received this Notice in error, please see the reverse side.

Sincerely,

Nancy E. O' Malley
District Attorney

See reverse side →

This notice has been printed and mailed on behalf of my office by a third party administrator of the Bad Check Restitution Program at no cost to the taxpayer.

■ **IF YOU BELIEVE YOU RECEIVED THIS NOTICE IN ERROR OR WISH TO DISPUTE THIS NOTICE IN WRITING:**

- Review your records CAREFULLY.
- Call the District Attorney's Bad Check Restitution Program Office at (866)740-7398.
- Ask for a Compliance Specialist.
- Explain the error.
- The Compliance Specialist will ask you to fax or mail in documentation of the error. For cases involving stop payments on checks or performance disputes, please consult a Compliance Specialist for more information.
- You may dispute the validity of this allegation in writing to this Office within 30 days of receiving this Official Notice. Upon submitting your written dispute not later than 30 days after receiving the Official Notice (along with any relevant supporting documentation), the authorized administrator of the Bad Check Restitution Program will review the written dispute based on criteria established by the Alameda County District Attorney.
- Fax or mail your case documentation to: **Fax: (800) 227-3041**

**Alameda County District Attorney
Bad Check Restitution Program
PO Box 1079
Oakland, CA 94612-1079**

■ **IF YOU BELIEVE YOU RECEIVED THIS NOTICE AS A RESULT OF IDENTITY THEFT, FORGERY, THEFT, OR OTHER FRAUD:**

You will be required to promptly provide further written documentation to support your claim. If you are a victim of identity theft, you will need to go to the bank to obtain and sign an identity theft affidavit. If you were not the victim of identity theft but did not write the check(s), you will need to go to the bank to obtain and sign an affidavit of forgery that you did not write the check(s) in question. In most cases, if you believe the check(s) were stolen or forged, you will also be required to file a police report.

■ **IF YOU BELIEVE YOU WERE NOT PROPERLY NOTIFIED:**

The Bad Check Restitution Program is only for reports of bad check activity from those businesses or parties that have notified you according to California State Law and provided you with an opportunity to make good on the check. In addition to notification from the party you issued the check to banks routinely send customers notice of returned items. Non-sufficient funds (NSF) checks also appear on your monthly account statement. **PLEASE CHECK YOUR RECORDS CAREFULLY.**

■ **IF YOU HAVE ALREADY PAID THE MERCHANT OR FILING PARTY:**

Please fax or mail documentation that the merchant or filing party received payment BEFORE the date of this Notice. Appropriate documentation consists of a receipt of payment to the victim and/or a cleared copy (front and back) of repayment to the victim. The administrator of the Bad Check Restitution Program will review the submitted documentation. Allow fourteen (14) days to process information before calling.

■ **IF YOU WANT TO CONTEST THIS MATTER:**

You have the right to choose not to participate, and to contest this matter. If you wish, you may want to consult an attorney. Personal bankruptcies DO NOT void responsibility in a criminal matter.

To Make Payment/Schedule Class, Call (866)740-7398 or www.checkprogram.com

Case Number: 42411526 Password: 39632773

PAYMENTS ACCEPTED: CREDIT & DEBIT CARDS, WESTERN UNION, MONEY ORDERS, OR CASHIER'S CHECK

■ **TERMS AND CONDITIONS OF THE BAD CHECK RESTITUTION PROGRAM:**

Participant agrees to participate in the Alameda County District Attorney Bad Check Restitution Program ("Program"). Participant acknowledges and agrees that the fees charged for the Program are reasonable and appropriate. Participant acknowledges and agrees that in addition to the fees that are charged, participant is required to attend a rehabilitative counseling class conducted by an instructor hired by the private entity under contract with the District Attorney to administer the Program ("Administrator"). Participant further agrees that by paying the fees charged for the Program, participant is bound by the terms and conditions of the Program, as set forth in this agreement.

Agreement to Arbitrate: You and Administrator agree to resolve any and all claims and disputes relating in any way to the Program ("Claims"), except for Claims concerning the validity, scope or enforceability of this Arbitration Agreement, through BINDING INDIVIDUAL ARBITRATION before the American Arbitration Association ("AAA"). This means you will be unable to have Claim(s) resolved by a court or jury, or to participate in a class action or class arbitration. Other rights you would have if you went to court may be unavailable or limited in arbitration, including your right to appeal. The only exception to this agreement to arbitrate is that you and/or Administrator may seek relief in a small claims court for Claims within the jurisdiction of that court in any particular state.

CLASS ACTION WAIVER: NO ARBITRATOR OR COURT MAY ORDER, PERMIT OR CERTIFY A CLASS ACTION, REPRESENTATIVE ACTION, PRIVATE ATTORNEY-GENERAL ACTION OR CONSOLIDATED ARBITRATION IN CONNECTION WITH THIS ARBITRATION AGREEMENT. NO ARBITRATOR OR COURT MAY ORDER OR PERMIT A JOINDER OF PARTIES IN CONNECTION WITH THIS ARBITRATION AGREEMENT UNLESS ALL PARTIES CONSENT TO SUCH JOINDER IN WRITING.

Governing Law and Jurisdiction: Any arbitration proceeding will be governed by the Consumer Procedures or other applicable rules of AAA in effect when the Claim is filed. The arbitration proceeding will take place in the county where you reside or any other mutually acceptable location. Judgment on the arbitration award may be entered in any court having jurisdiction.

The arbitrator shall follow applicable law and is empowered to grant any relief, including attorneys' fees, costs, and other expenses, to the extent such relief would be available in court. You and Administrator agree the Program and transactions subject to this Arbitration Agreement involve interstate commerce and that this Arbitration Agreement is governed by and enforceable under the Federal Arbitration Act. You and Administrator also agree this Arbitration Agreement extends to parties related to Administrator that are involved in any Claims, including without limitation, Administrator's parents, affiliates, subsidiaries, agents, principals, contractors, officers and employees.

Costs: Administrator shall pay all arbitration costs if it initiates arbitration. If you initiate arbitration, you will not be required to pay any fees that exceed the fees you would have paid had you brought the Claim(s) in court. You may seek a waiver of the filing fee under AAA Rules. If you do not qualify for a waiver, you may request, in writing, that Administrator advance all or part of the filing fee.

Enforceability: This Arbitration Agreement shall govern if there is a conflict between it and the AAA Rules, unless Administrator waives any conflict in writing. If any part of this Arbitration Agreement, except the class action waiver, is found invalid or unenforceable, the remaining provisions shall remain in full force and effect. If the class action waiver is found invalid or unenforceable as to a particular Claim, the Arbitration Agreement shall not apply to that Claim.

You may contact AAA to obtain information about arbitration, arbitration procedures and fees by calling 800-778-7879 or visiting www.adr.org.

YOU HAVE THE RIGHT TO REJECT THIS ARBITRATION AGREEMENT, BUT YOU MUST DO SO PROMPTLY. If you do not agree to arbitration, you must notify us in writing within sixty (60) days after the date you enroll in the Program. You must send your notice to: 806 E Avenida Pico STE I PMB 340, San Clemente, CA 92673-5639, and include your full name, address, and the statement "I reject the arbitration agreement for the Alameda County District Attorney Bad Check Restitution Program."

■ **OTHER IMPORTANT INFORMATION:**

Completion of the Bad Check Restitution Program is valid ONLY if you comply with ALL District Attorney's requirements. Should you be permitted to comply by a payment plan, such payments may be allocated ratably between restitution and program fees until they are fully satisfied. By making full or partial payment, you are agreeing to be enrolled in the Bad Check Restitution Program, and you are agreeing to pay restitution on all reported checks as well as pay all required fees, including program, administrative, and returned item fees pursuant to the terms of this Notice. Once enrolled, program fees will be non-refundable.

You may wish to consult an attorney to obtain legal advice about your rights in regards to this matter.

The Program does not accept personal checks. Sending a personal check for payment shall be deemed sufficient authorization to complete the payment via electronic debit. By doing so, your checking account will be debited for the amount of the check and your cancelled check will not be returned to your bank. Electronic debit entries returned for insufficient or uncollected funds may be resubmitted two times following the return of the original entry.

Please note, your balance may increase if additional checks are reported to this office or program fees are changed. Additionally, you may incur a fee for missing or rescheduling class, making a late or insufficient payment, and/or paying over the phone or Internet.



OFFICIAL NOTICE - IMMEDIATE ATTENTION REQUIRED

BALANCE DUE ON 02/18/2014

\$730.00

Office Hours: 9:00 a.m. - 5:00 p.m.

Page: 5 of 5

PAYMENT OPTIONS:

- 1. INTERNET **www.checkprogram.com**
 Case Number: 42411526
 Password: 39632773
Credit and Debit Cards

- 2. PHONE (866)740-7398
Credit and Debit Cards or Western Union

- 3. MAIL **Alameda County District Attorney**
Bad Check Restitution Program
 PO Box 1079
 Oakland, CA 94604-1079
Money Orders and Cashier's Checks Only

VICTIM	CHECK #	DATE	AMOUNT	RETURNED ITEM FEE	ADMIN FEE	TOTAL THIS CHECK
DUBLIN HYUNDAI	508	9/14/2013	\$500.00	\$0.00	\$50.00	\$550.00
Financial Accountability Class Fee						\$180.00
TOTAL BALANCE DUE:						\$730.00

*** Additional service fee may be due victim. ***

To Make Payment/Schedule Class, Call (866)740-7398 or www.checkprogram.com

Case Number: 42411526 Password: 39632773

PAYMENTS ACCEPTED: CREDIT & DEBIT CARDS, WESTERN UNION, MONEY ORDERS, OR CASHIER'S CHECK

— EXHIBIT 4 —



Alameda County District Attorney
Bad Check Restitution Program
 PO Box 1079
 Oakland, CA 94604-1079

Nancy E. O'Malley
 District Attorney



FAILURE TO RESPOND - IMMEDIATE ATTENTION REQUIRED

*** 0203-00414-001 kjb94063@hotmail.com
 3000000513 01.0000.0000 392/1

Office Hours: 9:00 a.m. - 5:00 p.m.
 Phone: (866)740-7398
 Date of Notice: 02/03/2014
 Case #: 42411526
 Balance Due: \$730.00
 Page: 1

KEVIN J BREATZEALE
 37200 PASEO PADRE PKWY APT 152
 FREMONT CA 94555

Our records indicate that you have failed to respond or fully comply with the District Attorney's Official Notice.

Call this Office by 02/13/2014 if you wish to participate in the Bad Check Restitution Program.

Successful completion of the program requires that you comply with all Bad Check Restitution Program requirements including full restitution, all fees and attendance of the Financial Accountability class. You may receive further notices and/or phone calls while program requirements remain outstanding.

Our records indicate that you currently have an outstanding balance of \$730.00.

Our records indicate you have not completed your Financial Accountability class requirement.

If you have already mailed or arranged your required payment(s) and completed or scheduled the educational class, please disregard this Notice. Otherwise, please call (866)740-7398 or go to our secure website at www.checkprogram.com. To access your file online you will need to enter your case number, which is 42411526, and the following password: 39632773.

Thank you for your immediate attention to this matter.

Sincerely,

Nancy E. O' Malley
District Attorney

The Alameda County District Attorney's Bad Check Restitution Program is administered by a private entity under contract with the Alameda County District Attorney.

To Make Payment/Schedule Class, call (866)740-7398 or www.checkprogram.com

Case Number: 42411526 Password: 39632773

PAYMENTS ACCEPTED: CREDIT & DEBIT CARDS, WESTERN UNION, MONEY ORDERS, OR CASHIER'S CHECK

— EXHIBIT 5 —



Case 3:14-cv-05266 Document 1-5 Filed 12/01/14 Page 2 of 2
Alameda County District Attorney
Bad Check Restitution Program
 PO Box 1079
 Oakland, CA 94604-1079

Nancy E. O'Malley
 District Attorney



WARNING - SECOND NOTICE OF FAILURE TO COMPLY

*** 0306-00749-001 kjb94063@hotmail.com
 3000000938 01.0000.0000 656/1

Office Hours: 9:00 a.m. - 5:00 p.m.
 Phone: (866)740-7398
 Date of Notice: 03/06/2014
 Case #: 42411526
 Balance Due: \$730.00
 Page: 1

KEVIN J BREAZEALE
 37200 PASEO PADRE PKWY APT 152
 FREMONT CA 94555

You have failed to respond to the District Attorney's Notices regarding California Penal Code 476a, entitled "Making or Delivering Check With Insufficient Funds". Prior attempts to resolve this situation have been unsuccessful.

You cannot participate in the Bad Check Restitution Program unless you contact this office prior to 03/13/2014. If you wish to participate in the program, call this Office during the hours listed above.

Successful completion of the program requires that you comply with all Bad Check Restitution Program requirements including full restitution, all fees and attendance of the Financial Accountability class. You may receive further notices and/or phone calls while program requirements remain outstanding.

Our records indicate that you currently have an outstanding balance of \$730.00.

Our records indicate you have not completed your Financial Accountability class requirement.

If you have already mailed or arranged your required payment(s) and completed or scheduled the educational class, please disregard this Notice. Otherwise, please call (866)740-7398 or go to our secure website at www.checkprogram.com. To access your file online you will need to enter your case number, which is 42411526, and the following password: 39632773.

Thank you for your immediate attention to this matter.

Sincerely,

Nancy E. O' Malley
District Attorney

The Alameda County District Attorney's Bad Check Restitution Program is administered by a private entity under contract with the Alameda County District Attorney.

To Make Payment/Schedule Class, call (866)740-7398 or www.checkprogram.com

Case Number: 42411526 Password: 39632773

PAYMENTS ACCEPTED: CREDIT & DEBIT CARDS, WESTERN UNION, MONEY ORDERS, OR CASHIER'S CHECK

— EXHIBIT 6 —



Orange County District Attorney
Bad Check Restitution Program
 806 E Avenida Pico STE I PMB 340
 San Clemente, CA 92673-5639



OFFICIAL NOTICE - IMMEDIATE ATTENTION REQUIRED

*** 1022DUP.BLU.001
 4000000187 01.0000.0000 67/1



KAREN SOLBERG
 2156 CANTALIER ST
 SACRAMENTO CA 95815-3808

Office Hours: 9:00 a.m. - 5:00 p.m.
 Phone: (800)931-9352
 Date of Notice: 10/22/2013
 Case #: 42058994
 Balance Due: \$285.00
 Page: 1

You have been accused of violating California Penal Code 476a, entitled "Making or Delivering Check With Insufficient Funds". A conviction under this statute is punishable by up to one (1) year in the county jail for checks up to \$450, and county jail or state prison for checks in excess of \$450. See page 5 for details on the party(s) initiating this allegation.

My office has established a Bad Check Restitution Program. The Bad Check Restitution Program is authorized by the California legislature, and is a pre-charge program designed to allow people accused of having violated the above-referenced statute to avoid the possibility of further action against the accused by the District Attorney's Office. Participation in the Bad Check Restitution Program is voluntary. The Bad Check Restitution Program has two steps:

1. Pay all restitution on all reported checks, plus any administrative, returned item, and program fees.
2. Attend a Financial Accountability class.

Orange County District Attorney Bad Check Restitution Program

TOTAL BALANCE DUE: \$285.00

You have the right to dispute this matter, as set forth on page 2 of this notice. In order to participate in the Bad Check Restitution Program you must pay in full and schedule class within THIRTY (30) DAYS from the date of this Notice.

PLEASE CALL (800)931-9352 or visit www.checkprogram.com
TO MAKE PAYMENT/SCHEDULE CLASS

Please have your case number ready: 42058994 and Password: 39296883

PAYMENTS ACCEPTED: CREDIT & DEBIT CARDS, WESTERN UNION, MONEY ORDERS, OR CASHIER'S CHECK

If you choose to participate in the Bad Check Restitution Program, and if you successfully complete the program's two steps above, my office will consider this matter resolved. The Bad Check Restitution Program is administered by a private entity under contract with the Orange County District Attorney.

For additional information or if you believe you received this Notice in error, please see the reverse side.

Sincerely,

Tony Rackauckas
 District Attorney

See reverse side →

This notice has been printed and mailed on behalf of my office by a third party administrator of the Bad Check Restitution Program at no cost to the taxpayer.

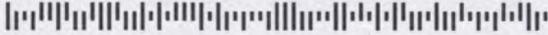
— EXHIBIT 7 —



080UQD8

OFFICIAL NOTICE - IMMEDIATE ATTENTION REQUIRED

*** 0619DUP.BLU.001
4000000122 01.0000.0000 42/1



KEVIN HIEP VU
9879 STURGEON AVE
FOUNTAIN VALLEY CA 92708-4618

Office Hours: 9:00 a.m. - 5:00 p.m.
Phone: (800)931-9352
Date of Notice: 06/19/2014
Case #: 42873230
Balance Due: \$752.75
Page: 1

You have been accused of violating California Penal Code 476a, entitled "Making or Delivering Check With Insufficient Funds". A conviction under this statute is punishable by up to one (1) year in the county jail for checks up to \$450, and county jail or state prison for checks in excess of \$450. See page 5 for details on the party(s) initiating this allegation.

My office has established a Bad Check Restitution Program. The Bad Check Restitution Program is authorized by the California legislature, and is a pre-charge program designed to allow people accused of having violated the above-referenced statute to avoid the possibility of further action against the accused by the District Attorney's Office. Participation in the Bad Check Restitution Program is voluntary. The Bad Check Restitution Program has two steps:

1. Pay all restitution on all reported checks, plus any administrative, returned item, and program fees.
2. Attend a Financial Accountability class.

Orange County District Attorney Bad Check Restitution Program

TOTAL BALANCE DUE: \$752.75

You have the right to dispute this matter, as set forth on page 2 of this notice. In order to participate in the Bad Check Restitution Program you must pay in full and schedule class within THIRTY (30) DAYS from the date of this Notice.

**PLEASE CALL (800)931-9352 or visit www.checkprogram.com TO
MAKE PAYMENT/SCHEDULE CLASS**

Please have your case number ready: 42873230 and Password: 40062189

PAYMENTS ACCEPTED: CREDIT & DEBIT CARDS, WESTERN UNION, MONEY ORDERS, OR CASHIER'S CHECK

If you choose to participate in the Bad Check Restitution Program, and if you successfully complete the program's two steps outlined above, my office will consider this matter resolved. The Bad Check Restitution Program is administered by a private entity under contract with the Orange County District Attorney.

For additional information or if you believe you received this Notice in error, please see the reverse side.

Sincerely,

Tony Rackauckas
District Attorney

See reverse side →

This notice has been printed and mailed on behalf of my office by a third party administrator of the Bad Check Restitution Program at no cost to the taxpayer.

■ **IF YOU BELIEVE YOU RECEIVED THIS NOTICE IN ERROR OR WISH TO DISPUTE THIS NOTICE IN WRITING:**

- Review your records CAREFULLY.
- Call the District Attorney's Bad Check Restitution Program Office at (800)931-9352.
- Ask for a Compliance Specialist.
- Explain the error.
- The Compliance Specialist will ask you to fax or mail in documentation of the error. For cases involving stop payments on checks or performance disputes, please consult a Compliance Specialist for more information.
- You may dispute the validity of this allegation in writing to this Office within 30 days of receiving this Official Notice. Upon submitting your written dispute not later than 30 days after receiving the Official Notice (along with any relevant supporting documentation), the authorized administrator of the Bad Check Restitution Program will review the written dispute based on criteria established by the Orange County District Attorney.
- Fax or mail your case documentation to: **Fax: (800) 227-3041**

**Orange County District Attorney
Bad Check Restitution Program
806 E Avenida Pico STE I PMB 340
San Clemente, CA 92673-5639**

■ **IF YOU BELIEVE YOU RECEIVED THIS NOTICE AS A RESULT OF IDENTITY THEFT, FORGERY, THEFT, OR OTHER FRAUD:**

You will be required to promptly provide further written documentation to support your claim. If you are a victim of identity theft, you will need to go to the bank to obtain and sign an identity theft affidavit. If you were not the victim of identity theft but did not write the check(s), you will need to go to the bank to obtain and sign an affidavit of forgery that you did not write the check(s) in question. In most cases, if you believe the check(s) were stolen or forged, you will also be required to file a police report.

■ **IF YOU BELIEVE YOU WERE NOT PROPERLY NOTIFIED:**

The Bad Check Restitution Program is only for reports of bad check activity from those businesses or parties that have notified you according to California State Law and provided you with an opportunity to make good on the check. In addition to notification from the party you issued the check to banks routinely send customers notice of returned items. Non-sufficient funds (NSF) checks also appear on your monthly account statement. **PLEASE CHECK YOUR RECORDS CAREFULLY.**

■ **IF YOU HAVE ALREADY PAID THE MERCHANT OR FILING PARTY:**

Please fax or mail documentation that the merchant or filing party received payment BEFORE the date of this Notice. Appropriate documentation consists of a receipt of payment to the victim and/or a cleared copy (front and back) of repayment to the victim. The administrator of the Bad Check Restitution Program will review the submitted documentation. Allow fourteen (14) days to process information before calling.

■ **IF YOU WANT TO CONTEST THIS MATTER:**

You have the right to choose not to participate, and to contest this matter. If you wish, you may want to consult an attorney. Personal bankruptcies DO NOT void responsibility in a criminal matter.

To Make Payment/Schedule Class, Call (800)931-9352 or www.checkprogram.com

Case Number: 42873230 Password: 40062189

PAYMENTS ACCEPTED: CREDIT & DEBIT CARDS, WESTERN UNION, MONEY ORDERS, OR CASHIER'S CHECK

■ TERMS AND CONDITIONS OF THE BAD CHECK RESTITUTION PROGRAM:

Participant agrees to participate in the Orange County District Attorney Bad Check Restitution Program ("Program"). Participant acknowledges and agrees that the fees charged for the Program are reasonable and appropriate. Participant acknowledges and agrees that in addition to the fees that are charged, participant is required to attend a rehabilitative counseling class conducted by an instructor hired by the private entity under contract with the District Attorney to administer the Program ("Administrator"). Participant further agrees that by paying the fees charged for the Program, participant is bound by the terms and conditions of the Program, as set forth in this agreement.

Agreement to Arbitrate: You and Administrator agree to resolve any and all claims and disputes relating in any way to the Program ("Claims"), except for Claims concerning the validity, scope or enforceability of this Arbitration Agreement, through BINDING INDIVIDUAL ARBITRATION before the American Arbitration Association ("AAA"). This means you will be unable to have Claim(s) resolved by a court or jury, or to participate in a class action or class arbitration. Other rights you would have if you went to court may be unavailable or limited in arbitration, including your right to appeal. The only exception to this agreement to arbitrate is that you and/or Administrator may seek relief in a small claims court for Claims within the jurisdiction of that court in any particular state.

CLASS ACTION WAIVER: NO ARBITRATOR OR COURT MAY ORDER, PERMIT OR CERTIFY A CLASS ACTION, REPRESENTATIVE ACTION, PRIVATE ATTORNEY-GENERAL ACTION OR CONSOLIDATED ARBITRATION IN CONNECTION WITH THIS ARBITRATION AGREEMENT. NO ARBITRATOR OR COURT MAY ORDER OR PERMIT A JOINDER OF PARTIES IN CONNECTION WITH THIS ARBITRATION AGREEMENT UNLESS ALL PARTIES CONSENT TO SUCH JOINDER IN WRITING.

Governing Law and Jurisdiction: Any arbitration proceeding will be governed by the Consumer Procedures or other applicable rules of AAA in effect when the Claim is filed. The arbitration proceeding will take place in the county where you reside or any other mutually acceptable location. Judgment on the arbitration award may be entered in any court having jurisdiction.

The arbitrator shall follow applicable law and is empowered to grant any relief, including attorneys' fees, costs, and other expenses, to the extent such relief would be available in court. You and Administrator agree the Program and transactions subject to this Arbitration Agreement involve interstate commerce and that this Arbitration Agreement is governed by and enforceable under the Federal Arbitration Act. You and Administrator also agree this Arbitration Agreement extends to parties related to Administrator that are involved in any Claims, including without limitation, Administrator's parents, affiliates, subsidiaries, agents, principals, contractors, officers and employees.

Costs: Administrator shall pay all arbitration costs if it initiates arbitration. If you initiate arbitration, you will not be required to pay any fees that exceed the fees you would have paid had you brought the Claim(s) in court. You may seek a waiver of the filing fee under AAA Rules. If you do not qualify for a waiver, you may request, in writing, that Administrator advance all or part of the filing fee.

Enforceability: This Arbitration Agreement shall govern if there is a conflict between it and the AAA Rules, unless Administrator waives any conflict in writing. If any part of this Arbitration Agreement, except the class action waiver, is found invalid or unenforceable, the remaining provisions shall remain in full force and effect. If the class action waiver is found invalid or unenforceable as to a particular Claim, the Arbitration Agreement shall not apply to that Claim.

You may contact AAA to obtain information about arbitration, arbitration procedures and fees by calling 800-778-7879 or visiting www.adr.org.

YOU HAVE THE RIGHT TO REJECT THIS ARBITRATION AGREEMENT, BUT YOU MUST DO SO PROMPTLY. If you do not agree to arbitration, you must notify us in writing within sixty (60) days after the date you enroll in the Program. You must send your notice to: 806 E Avenida Pico STE I PMB 340, San Clemente, CA 92673-5639, and include your full name, address, and the statement "I reject the arbitration agreement for the Orange County District Attorney Bad Check Restitution Program."

■ OTHER IMPORTANT INFORMATION:

Completion of the Bad Check Restitution Program is valid ONLY if you comply with ALL District Attorney's requirements. Should you be permitted to comply by a payment plan, such payments may be allocated ratably between restitution and program fees until they are fully satisfied. By making full or partial payment, you are agreeing to be enrolled in the Bad Check Restitution Program, and you are agreeing to pay restitution on all reported checks as well as pay all required fees, including program, administrative, and returned item fees pursuant to the terms of this Notice. Once enrolled, program fees will be non-refundable.

You may wish to consult an attorney to obtain legal advice about your rights in regards to this matter.

The Program does not accept personal checks. Sending a personal check for payment shall be deemed sufficient authorization to complete the payment via electronic debit. By doing so, your checking account will be debited for the amount of the check and your cancelled check will not be returned to your bank. Electronic debit entries returned for insufficient or uncollected funds may be resubmitted two times following the return of the original entry.

Please note, your balance may increase if additional checks are reported to this office or program fees are changed. Additionally, you may incur a fee for missing or rescheduling class, making a late or insufficient payment, and/or paying over the phone or Internet.



OFFICIAL NOTICE - IMMEDIATE ATTENTION REQUIRED

BALANCE DUE ON 07/19/2014

\$752.75

Office Hours: 9:00 a.m. - 5:00 p.m.

Page: 5 of 5

PAYMENT OPTIONS:

- 1. INTERNET www.checkprogram.com
 Case Number: 42873230
 Password: 40062189
 Credit and Debit Cards

- 2. PHONE (800)931-9352
 Credit and Debit Cards or Western Union

- 3. MAIL **Orange County District Attorney**
 Bad Check Restitution Program
 806 E Avenida Pico STE I PMB 340
 San Clemente, CA 92673-5639
 Money Orders and Cashier's Checks Only

VICTIM	CHECK #	DATE	AMOUNT	RETURNED ITEM FEE	ADMIN FEE	TOTAL THIS CHECK
HERBS VOLVO AND	0052	3/22/2014	\$536.75	\$6.00	\$50.00	\$592.75
Financial Accountability Class Fee						\$160.00
TOTAL BALANCE DUE:						\$752.75

*** Additional service fee may be due victim. ***

To Make Payment/Schedule Class, Call (800)931-9352 or www.checkprogram.com
 Case Number: 42873230 Password: 40062189
PAYMENTS ACCEPTED: CREDIT & DEBIT CARDS, WESTERN UNION, MONEY ORDERS, OR CASHIER'S CHECK

— EXHIBIT 8 —

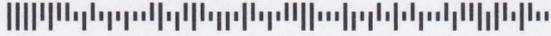


Orange County District Attorney
 Bad Check Restitution Program
 806 E Avenida Pico STE I PMB 340
 San Clemente, CA 92673-5639



FAILURE TO RESPOND - IMMEDIATE ATTENTION REQUIRED

*** 0707REG.BLU.001
 4000000915 01.0000.0000 839/1



KEVIN HIEP VU
 9879 STURGEON AVE
 FOUNTAIN VALLEY CA 92708-4618

Office Hours: 9:00 a.m. - 5:00 p.m.
 Phone: (800)931-9352
 Date of Notice: 07/07/2014
 Case #: 42873230
 Balance Due: \$216.00
 Page: 1

Our records indicate that you have failed to respond or fully comply with the District Attorney's Official Notice.

Call this Office by 07/17/2014 if you wish to participate in the Bad Check Restitution Program.

Successful completion of the program requires that you comply with all Bad Check Restitution Program requirements including full restitution, all fees and attendance of the Financial Accountability class. You may receive further notices and/or phone calls while program requirements remain outstanding.

Our records indicate that you currently have an outstanding balance of \$216.00.

Our records indicate you have not completed your Financial Accountability class requirement.

If you have already mailed or arranged your required payment(s) and completed or scheduled the educational class, please disregard this Notice. Otherwise, please call (800)931-9352 or go to our secure website at www.checkprogram.com. To access your file online you will need to enter your case number, which is 42873230, and the following password: 40062189.

Thank you for your immediate attention to this matter.

Sincerely,

Tony Rackauckas
 District Attorney

The Orange County District Attorney's Bad Check Restitution Program is administered by a private entity under contract with the Orange County District Attorney.

To Make Payment/Schedule Class, call (800)931-9352 or www.checkprogram.com

Case Number: 42873230 Password: 40062189

PAYMENTS ACCEPTED: CREDIT & DEBIT CARDS, WESTERN UNION, MONEY ORDERS, OR CASHIER'S CHECK

— EXHIBIT 9 —



08QBGZ2

WARNING - SECOND NOTICE OF FAILURE TO COMPLY

*** 0804REG.BLU.001
4000000755 01.0000.0000 680/1



KEVIN HIEP VU
9879 STURGEON AVE
FOUNTAIN VALLEY CA 92708-4618

Office Hours: 9:00 a.m. - 5:00 p.m.
Phone: (800)931-9352
Date of Notice: 08/04/2014
Case #: 42873230
Balance Due: \$216.00
Page: 1

You have failed to respond to the District Attorney's Notices regarding California Penal Code 476a, entitled "Making or Delivering Check With Insufficient Funds". Prior attempts to resolve this situation have been unsuccessful.

You cannot participate in the Bad Check Restitution Program unless you contact this office prior to 08/11/2014. If you wish to participate in the program, call this Office during the hours listed above.

Successful completion of the program requires that you comply with all Bad Check Restitution Program requirements including full restitution, all fees and attendance of the Financial Accountability class. You may receive further notices and/or phone calls while program requirements remain outstanding.

Our records indicate that you currently have an outstanding balance of \$216.00.

Our records indicate you have not completed your Financial Accountability class requirement.

If you have already mailed or arranged your required payment(s) and completed or scheduled the educational class, please disregard this Notice. Otherwise, please call (800)931-9352 or go to our secure website at www.checkprogram.com. To access your file online you will need to enter your case number, which is 42873230, and the following password: 40062189.

Thank you for your immediate attention to this matter.

Sincerely,

Tony Rackauckas
District Attorney

The Orange County District Attorney's Bad Check Restitution Program is administered by a private entity under contract with the Orange County District Attorney.

To Make Payment/Schedule Class, call (800)931-9352 or www.checkprogram.com

Case Number: 42873230 Password: 40062189

PAYMENTS ACCEPTED: CREDIT & DEBIT CARDS, WESTERN UNION, MONEY ORDERS, OR CASHIER'S CHECK

— EXHIBIT 10 —

AMERICAN BAR ASSOCIATION

STANDING COMMITTEE ON ETHICS AND PROFESSIONAL RESPONSIBILITY

Formal Opinion 469 Prosecutors and Debt Collection Companies

November 12, 2014

A prosecutor who provides official letterhead of the prosecutor's office to a debt collection company for use by that company to create a letter purporting to come from the prosecutor's office that implicitly or explicitly threatens prosecution, when no lawyer from the prosecutor's office reviews the case file to determine whether a crime has been committed and prosecution is warranted or reviews the letter to ensure it complies with the Rules of Professional Conduct, violates Model Rules 8.4(c) and 5.5(a).

Introduction

Debt collection companies are contracting with local prosecutors' offices to use prosecutor letterhead to create and mail collection demand letters. These demand letters typically cite the criminal law allegedly violated (such as making or delivering a check with insufficient funds) and advise the debtor that she/he could avoid the possibility of further action from the prosecutor's office by paying the amount of the debt, and in a significant number of cases, a substantial additional fee to attend a mandatory debtor education course. Typically, no lawyer in the prosecutor's office reviews the case file to determine whether a crime has been committed and prosecution is warranted or reviews the letter to ensure it complies with the Rules of Professional Conduct prior to the mailing.¹

The Committee concludes that prosecutors involved in this practice violate Model Rules of Professional Conduct 8.4(c) and 5.5(a).

Application of the Rules of Professional Conduct to Prosecutors: Jurisdictional Statement

There is no question that prosecutors are subject to the rules of professional conduct. As ABA Formal Opinion 97-405, Conflicts in Representing Government Entities (1997), explained, "While lawyers who serve as public officers or employees are singled out for special treatment under a few rules, e.g., Rule 1.11 ('Successive Government and Private Employment') and 3.8 ('Special Responsibilities of a Prosecutor'), it has generally been assumed—correctly in our

1. For a full discussion of this country-wide practice, see Jessica Silver-Greenberg, *In Prosecutors, Debt Collectors Find a Partner*, NY TIMES (Sept. 15, 2012), <http://www.nytimes.com/2012/09/16/business/in-prosecutors-debt-collectors-find-a-partner.html?pagewanted=all&r=0>; Joel Cohen, *When District Attorneys Become Bill Collectors*, AMERICAN LAWYER (Nov. 19, 2012), <http://www.americanlawyer.com/id=1202578727214/When-District-Attorneys-Become-Bill-Collectors?slreturn=20140311111758>; Mosi Secret, *Bounced Checks: How Local District Attorneys Get a Cut of the Debt Collection Business*, PROPUBLICA (Mar. 2, 2009), <http://www.propublica.org/article/bounced-checks-how-local-das-get-a-cut-of-the-debt-collection-business>. While programs vary depending on the terms of the contract between the prosecutor's office and the collection company, one thing does not: prosecutors allow debt collection companies to misrepresent the author and sender of this threatening letter. To review a copy of a debt collection letter issued by collection companies on prosecutor letterhead see *Letter from Bad Check Restitution Program*, NY TIMES (Sept. 16, 2012), http://www.nytimes.com/interactive/2012/09/16/business/20120916_DEBT_LETTER.html?ref=business. In 2013, the Oregon legislature passed a state bill prohibiting prosecutors from allowing collection companies to use their letterhead. OR. REV. STAT. §646.639 (2013), available at http://www.oregonlegislature.gov/bills_laws/lawsstatutes/2013orLaw0551.pdf.

view—that such lawyers are in most other respects subject to the same obligations in representing their client that apply to lawyers representing private clients.”

Prosecutors acknowledge their ethical obligations as lawyers. Most prosecutors fulfill those obligations conscientiously and live up to the even higher responsibility of a minister of justice, as prescribed by Comment [1] to Rule 3.8. However, occasionally practices have taken hold in prosecutors’ offices that, while driven by budgetary exigencies, fall short of their higher calling. It is such practices that have created the need for this opinion.

Model Rule 8.4, Misconduct

A prosecutor who enters into the type of agreement described in this opinion violates Model Rule 8.4(c), which provides that: “It is professional misconduct for a lawyer to engage in conduct involving dishonesty, fraud, deceit or misrepresentation.”

In 1943, the ABA issued Formal Opinion 253, which determined that it would be unethical for a lawyer to allow a client to use the lawyer’s stationery to deceive a debtor into believing that the debt had been referred to the lawyer and that the lawyer had written the collection letter. Specifically, the Committee noted that the practice violated Canon 15, which read in part: “The office of attorney does not permit, much less does it demand of him for any client, violation of law or any manner of fraud or chicanery. He must obey his own conscience and not that of his client.”² The Committee explained that a lawyer who allowed a client to send a collection letter on the lawyer’s stationery was a party to deception and violated Canon 15. Today, Model Rule 8.4(c) addresses this same conduct.

To the same effect is a joint opinion of the New Jersey Committee on the Unauthorized Practice of Law and Advisory Committee on Professional Ethics, which determined that a lawyer who sold his “name and letterhead to a collection agency in exchange for a monthly fee” violated Rule 8.4(c).³ The conduct enabled the debt collection agency to deceive the debtor into believing that the lawyer was about to institute proceedings to collect the alleged debt by sending a collection letter on firm stationery, giving the debtor reason to believe that “there has been an evaluation by an attorney of the claim asserted with a determination by the attorney that proceedings to ensure collections are warranted.”

Such letters written on prosecutors’ letterhead are even more deceptive than the letters dealt with in ABA Formal Opinion 253 and in the New Jersey Joint Opinions 48 and 725. This is because they misuse the criminal justice system by deploying the apparent authority of a prosecutor to intimidate an individual. They carry with them the implication that the prosecutor or associates in the prosecutor’s office have reviewed the facts and found that a crime has been

2. ABA Canons of Prof’l Ethics, Canon 15 (1908).

3. N.J. Comm. on the Unauthorized Practice of Law & Advisory Comm. on Prof’l Ethics, Joint Ops. 48 & 725 (2012).

committed and criminal prosecution is warranted. To create such a false impression violates Rule 8.4(c).⁴

Model Rule 5.5, Unauthorized Practice of Law; Multijurisdictional Practice of Law

Since at least 1932, the ABA Standing Committee on Ethics and Professional Responsibility has written about lawyers working for and with creditors to collect allegedly delinquent debts.⁵ Many of these opinions have focused on what is the proper allocation of duties between lawyers and laymen in collection matters to ensure that the lawyer is not aiding in the unauthorized practice of law.

Only a licensed lawyer may practice law, and states prohibit the unlicensed practice to protect consumers. Limiting the practice of law to members of the bar “protects the public against rendition of legal services by unqualified persons”⁶ and serves to protect the public from unscrupulous persons’ engaging in abusive conduct and misuse of the law. Model Rule 5.5(a) prohibits a lawyer from “assisting another” in practicing law in violation of that jurisdiction’s regulations.⁷

The practice of law is defined by state statute and case law.⁸ In the collection area, generally, a nonlawyer may negotiate, adjust, and settle a debt on behalf of a creditor, but a nonlawyer cannot give legal advice, institute litigation, or threaten to sue on behalf of another.⁹ The participation by a prosecutor in the conduct described in this opinion, wherein the prosecutor supplies official letterhead to a debt collection company and allows the debt collection company to use it to send threatening letters to alleged debtors without any review by the prosecutor or staff lawyers to determine whether a crime was committed and prosecution is warranted, violates Rule 5.5(a) by aiding and abetting the unauthorized practice of law.¹⁰

In ABA Formal Opinion 68 (1932), the Committee determined that a lawyer who provided a client corporation with signed letterhead so that the client could write to persons who owed the client money “over the attorney’s supposed signature” violated Canon 35 of the ABA Canons of Professional Ethics (1928). The Committee explained that by giving the client signed

4. Believing that ABA Model Rule 8.4(b) addressed the crimes of extortion and compounding a crime, when the ABA adopted the Model Rules in 1983, it deliberately omitted former Disciplinary Rule 7-105(A), which prohibited a lawyer from threatening criminal charges to gain an advantage in a civil matter. See ABA Comm. on Ethics & Prof'l Responsibility, Formal Op. 94-383 (1994) (threatening a disciplinary complaint against opposing counsel to gain an advantage in a civil matter may violate Rule 8.4(b) if the conduct is extortion under jurisdiction's law). Therefore, depending on the jurisdiction in which the prosecutor practices, if the threat to file a criminal action meets the jurisdiction's elements of extortion, the prosecutor could also be in violation of Rule 8.4(b). Prosecutors have not been excluded from the application of Rule 8.4(b). In *In re Gobel*, the Supreme Court of Nebraska suspended a lawyer for three months because, while county attorney, he threatened the debtor of a private client that unless a debt was immediately paid, the lawyer would file criminal charges against the debtor. *In re Gobel*, 271 N.W.2d 41(1978).

5. See ABA Comm. on Ethics & Prof'l Responsibility, Formal Op. 68 (1932), Formal Op. 253 (1943) & Informal Op. 1368 (1976).

6. ABA MODEL R. 5.5, cmt. [2] (2014).

7. See ABA MODEL R. 5.5(a) (2014).

8. ABA MODEL R. 5.5, cmt. [2] (2014).

9. ABA/BNA Laws. Man. on Prof. Conduct § 21:8011 (ABA/BNA 2011).

10. The Committee has become aware of a similar practice that involves a state overpayment of a benefit to a recipient. In that situation, a prosecutor lends office stationery to a state agency so that the agency's employees can use prosecutor letterhead to threaten criminal prosecution for failure to remit the overpayment. This practice, structured similarly to the one presented, would also violate the Rules of Professional Conduct.

letterhead, the lawyer delegated his professional functions - which were strictly personal to the lawyer - to a nonlawyer. This conclusion is consistent with state Supreme Court decisions and bar association ethics opinions.¹¹

The conduct at issue in this opinion is even more abusive than that in Formal Opinion 68 because it gives the impression that the machinery of the criminal justice system has been mobilized against the debtor, and that unless the debtor pays the debt, the debtor faces criminal prosecution and possible incarceration.

Conclusion

A prosecutor who provides official letterhead of the prosecutor's office to a debt collection company for use by that company to create a letter purporting to come from the prosecutor's office that implicitly or explicitly threatens prosecution, when no lawyer from the prosecutor's office reviews the case file to determine whether a crime has been committed and prosecution is warranted or reviews the letter to ensure that it complies with the Rules of Professional Conduct, violates Model Rules 8.4(c) and 5.5(a).

11. See *Yount v. Zarbell*, 135 P.2d 309 (Wash. 1943) (lawyer who lends her signature to collection agent aids in the unauthorized practice of law); *In re DeVinny*, 255 N.W.2d 832 (Minn. 1977) (lawyer who allows collection agency to draft letters to debtors under his signature and who does not review and approve said letters aids unauthorized practice of law); *Adams v. Kentucky Bar Ass'n*, 843 S.W.2d 898 (Ky. 1991) (Assistant County Attorney aided the unauthorized practice of law when he "delegated authority and responsibility for deciding which parents of students in the Christian County School System would receive" letter threatening jail for nonpayment of school fees.); *In re Scheck*, 574 N.Y.S.2d 372 (N.Y. 1991) (lawyer who allowed collection company to use his name, letterhead and signature to send letters to debtors without actually reviewing letters sent out under his name aids in unauthorized practice of law); *In re Hear*, 755 N.E.2d 579 (Ind. 2001) (lawyer, who contracted with debt collector to perform services, and failed to make reasonable efforts to ensure that collector's conduct complied with rules of professional conduct, violated Rule 5.3). See also Ill. State Bar Ass'n, Op. 85-7 (1985) ("A lawyer may not allow unsupervised lay persons to prepare letters on the lawyer's stationery, with or without the lawyer's signature, if the letter states or implies legal conclusions- i.e., that the addressee is liable for the amount claimed- or threatens litigation if the purported debt is not paid. Such activities would constitute unauthorized practice of law by lay persons . . ."); State Bar of Georgia, Formal Op. 00-2 (2000) ("[A] lawyer is aiding a nonlawyer in the unauthorized practice of law when the lawyer allows a nonlawyer member of his or her staff to prepare and sign correspondence which threatens legal action or provides legal advice or both. Generally, a lawyer is aiding a nonlawyer in the unauthorized practice of law whenever the lawyer effectively substitutes the legal knowledge and judgment of the nonlawyer for his or her own."); L.A. County Bar Ass'n Prof'l Responsibility & Ethics Comm., Op. 522 (2009) ("[A]n attorney may not lend his or her name to be used by an unlicensed person. . . . The power and privileges attendant to the right to practice law may not be delegated to a nonlicensed person . . . To facilitate or assist an unlicensed person such as a legal assistant to engage in the practice of law would constitute aiding and abetting UPL." (internal citations omitted)).

AMERICAN BAR ASSOCIATION STANDING COMMITTEE ON ETHICS AND PROFESSIONAL RESPONSIBILITY

321 N. Clark Street, Chicago, Illinois 60654-4714 Telephone (312) 988-5328

CHAIR: Paula J. Frederick, Atlanta, GA ■ T. Maxfield Bahner, Chattanooga, TN ■ Barbara S. Gillers, New York, NY ■

Amanda Jones, Chicago, IL ■ Donald R. Lundberg, Indianapolis, IN ■ Myles V. Lynk, Tempe, AZ ■

J. Charles Mokriski, Boston, MA ■ Ellen A. Pansky, South Pasadena, CA ■ Jennifer A. Paradise, New York, NY ■ Richard H. Underwood, Lexington, KY

CENTER FOR PROFESSIONAL RESPONSIBILITY: Dennis A. Rendleman, Ethics Counsel, Mary McDermott, Associate Ethics Counsel

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CIVIL COVER SHEET

The JS 44 civil cover sheet and the information contained herein neither replace nor supplement the filing and service of pleadings or other papers as required by law, except as provided by local rules of court. This form, approved by the Judicial Conference of the United States in September 1974, is required for the use of the Clerk of Court for the purpose of initiating the civil docket sheet. (SEE INSTRUCTIONS ON NEXT PAGE OF THIS FORM.)

I. (a) PLAINTIFFS

(b) County of Residence of First Listed Plaintiff (EXCEPT IN U.S. PLAINTIFF CASES)

(c) Attorneys (Firm Name, Address, and Telephone Number)

DEFENDANTS

County of Residence of First Listed Defendant (IN U.S. PLAINTIFF CASES ONLY)

NOTE: IN LAND CONDEMNATION CASES, USE THE LOCATION OF THE TRACT OF LAND INVOLVED.

Attorneys (If Known)

II. BASIS OF JURISDICTION (Place an "X" in One Box Only)

- 1 U.S. Government Plaintiff, 2 U.S. Government Defendant, 3 Federal Question (U.S. Government Not a Party), 4 Diversity (Indicate Citizenship of Parties in Item III)

III. CITIZENSHIP OF PRINCIPAL PARTIES (Place an "X" in One Box for Plaintiff and One Box for Defendant)

- Citizen of This State, Citizen of Another State, Citizen or Subject of a Foreign Country, PTF DEF, Incorporated or Principal Place of Business In This State, Incorporated and Principal Place of Business In Another State, Foreign Nation

IV. NATURE OF SUIT (Place an "X" in One Box Only)

Table with 5 columns: CONTRACT, REAL PROPERTY, TORTS, CIVIL RIGHTS, PRISONER PETITIONS, FORFEITURE/PENALTY, LABOR, IMMIGRATION, BANKRUPTCY, SOCIAL SECURITY, FEDERAL TAX SUITS, OTHER STATUTES. Contains various legal categories and sub-categories with checkboxes.

V. ORIGIN (Place an "X" in One Box Only)

- 1 Original Proceeding, 2 Removed from State Court, 3 Remanded from Appellate Court, 4 Reinstated or Reopened, 5 Transferred from Another District, 6 Multidistrict Litigation

VI. CAUSE OF ACTION

Cite the U.S. Civil Statute under which you are filing (Do not cite jurisdictional statutes unless diversity): Brief description of cause:

VII. REQUESTED IN COMPLAINT:

CHECK IF THIS IS A CLASS ACTION UNDER RULE 23, F.R.Cv.P. DEMAND \$ CHECK YES only if demanded in complaint: JURY DEMAND: Yes No

VIII. RELATED CASE(S) IF ANY

(See instructions): JUDGE DOCKET NUMBER

DATE SIGNATURE OF ATTORNEY OF RECORD

05/4+

(Place an "X" in One Box Only) () SAN FRANCISCO/OAKLAND () SAN JOSE () EUREKA

INSTRUCTIONS FOR ATTORNEYS COMPLETING CIVIL COVER SHEET FORM JS 44

Authority For Civil Cover Sheet

The JS 44 civil cover sheet and the information contained herein neither replaces nor supplements the filings and service of pleading or other papers as required by law, except as provided by local rules of court. This form, approved by the Judicial Conference of the United States in September 1974, is required for the use of the Clerk of Court for the purpose of initiating the civil docket sheet. Consequently, a civil cover sheet is submitted to the Clerk of Court for each civil complaint filed. The attorney filing a case should complete the form as follows:

- I.(a) Plaintiffs-Defendants.** Enter names (last, first, middle initial) of plaintiff and defendant. If the plaintiff or defendant is a government agency, use only the full name or standard abbreviations. If the plaintiff or defendant is an official within a government agency, identify first the agency and then the official, giving both name and title.
- (b) County of Residence.** For each civil case filed, except U.S. plaintiff cases, enter the name of the county where the first listed plaintiff resides at the time of filing. In U.S. plaintiff cases, enter the name of the county in which the first listed defendant resides at the time of filing. (NOTE: In land condemnation cases, the county of residence of the "defendant" is the location of the tract of land involved.)
- (c) Attorneys.** Enter the firm name, address, telephone number, and attorney of record. If there are several attorneys, list them on an attachment, noting in this section "(see attachment)".
- II. Jurisdiction.** The basis of jurisdiction is set forth under Rule 8(a), F.R.Cv.P., which requires that jurisdictions be shown in pleadings. Place an "X" in one of the boxes. If there is more than one basis of jurisdiction, precedence is given in the order shown below.
 United States plaintiff. (1) Jurisdiction based on 28 U.S.C. 1345 and 1348. Suits by agencies and officers of the United States are included here.
 United States defendant. (2) When the plaintiff is suing the United States, its officers or agencies, place an "X" in this box.
 Federal question. (3) This refers to suits under 28 U.S.C. 1331, where jurisdiction arises under the Constitution of the United States, an amendment to the Constitution, an act of Congress or a treaty of the United States. In cases where the U.S. is a party, the U.S. plaintiff or defendant code takes precedence, and box 1 or 2 should be marked.
 Diversity of citizenship. (4) This refers to suits under 28 U.S.C. 1332, where parties are citizens of different states. When Box 4 is checked, the citizenship of the different parties must be checked. (See Section III below; **NOTE: federal question actions take precedence over diversity cases.**)
- III. Residence (citizenship) of Principal Parties.** This section of the JS 44 is to be completed if diversity of citizenship was indicated above. Mark this section for each principal party.
- IV. Nature of Suit.** Place an "X" in the appropriate box. If the nature of suit cannot be determined, be sure the cause of action, in Section VI below, is sufficient to enable the deputy clerk or the statistical clerk(s) in the Administrative Office to determine the nature of suit. If the cause fits more than one nature of suit, select the most definitive.
- V. Origin.** Place an "X" in one of the six boxes.
 Original Proceedings. (1) Cases which originate in the United States district courts.
 Removed from State Court. (2) Proceedings initiated in state courts may be removed to the district courts under Title 28 U.S.C., Section 1441. When the petition for removal is granted, check this box.
 Remanded from Appellate Court. (3) Check this box for cases remanded to the district court for further action. Use the date of remand as the filing date.
 Reinstated or Reopened. (4) Check this box for cases reinstated or reopened in the district court. Use the reopening date as the filing date.
 Transferred from Another District. (5) For cases transferred under Title 28 U.S.C. Section 1404(a). Do not use this for within district transfers or multidistrict litigation transfers.
 Multidistrict Litigation. (6) Check this box when a multidistrict case is transferred into the district under authority of Title 28 U.S.C. Section 1407. When this box is checked, do not check (5) above.
- VI. Cause of Action.** Report the civil statute directly related to the cause of action and give a brief description of the cause. **Do not cite jurisdictional statutes unless diversity.** Example: U.S. Civil Statute: 47 USC 553 Brief Description: Unauthorized reception of cable service
- VII. Requested in Complaint.** Class Action. Place an "X" in this box if you are filing a class action under Rule 23, F.R.Cv.P.
 Demand. In this space enter the actual dollar amount being demanded or indicate other demand, such as a preliminary injunction.
 Jury Demand. Check the appropriate box to indicate whether or not a jury is being demanded.
- VIII. Related Cases.** This section of the JS 44 is used to reference related pending cases, if any. If there are related pending cases, insert the docket numbers and the corresponding judge names for such cases.

Date and Attorney Signature. Date and sign the civil cover sheet.

UNITED STATES DISTRICT COURT
NORTHERN DISTRICT OF CALIFORNIA

Kevin Breaseale, et al. v. Victim Services, Inc., et al.

ATTACHMENT TO CIVIL COVER SHEET

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