St. George Police Department

Fraud/Identity Theft Report Packet

ATTENTION: If you are a victim of FRAUD to include the unlawful use or acquisition of your Debit/Credit card, Forgery or Identity Theft (Use of your personal identifying information), please call (435)627-4300 and an officer will be dispatched to take a report.

This packet must be completed in order to obtain a police incident number

INSTRUCTIONS: Make sure the involved accounts are closed so no further fraudulent activity will occur. Complete an Affidavit of Fraud/Forgery with your financial institution and obtain a copy of it for this report. Also obtain an account statement to include the <u>actual Date/Time/Amount</u> and <u>Location</u> of the fraudulent transactions which is imperative for investigative follow up. Read and completely fill out this packet including the witness statement form. Please wait to sign the signature line that is located on the witness statement form, until the signature can be witnessed by an officer.

TIME is a factor in being able to obtain important evidence (video surveillance etc.)

Providing the needed information in a timely manner will assist law enforcement in the investigation of these crimes.

IRIS: Another option for victims of identity theft is to report the crime at www.idtheft.utah.gov which is the web site for the Identity Theft Reporting Information System (IRIS). Those who report identity theft at this web site will receive step-by step instruction on how to recover from the crime, complete an affidavit and make a report. Each report is automatically delivered to the local police department with jurisdiction over investigating each crime. This web site also provides important information on how to protect yourself from identity theft scams and other schemes to obtain your identity. Go to www.idtheft.utah.gov (See the attached IRIS information)

Victims of Internet Related Crimes can also go to www.ic3.gov which is the Internet Crime Complaint Center where a victim can file a report if the criteria outlined are met. Visit these web sites to learn how to better protect ones self from Identity Theft and Internet Related Crimes and follow the links to many other useful web sites and resources.

St. George Police Department

Debit/Credit Card Report

Date of Report:	Police Incident#				
Do You Live in the City of St. George? Yes or No					
Did the Fraud occur outside the City of St. George? Yes or No					
Where was the fraud committed?					
Victim Information					
Name:	DOB:				
Address:					
Phone# Cell Ph#	e-mail:				
SSN#DL#	DL state				
Suspect Information					
Do you have Suspect Information? Yes or No (If so complete the following section)					
Name:	DOB/AGE:				
Address:	Relation to Suspect:				
Phone# Cell Ph#	e-mail:				
Description of Suspect/Vehicle Known to Drive:					

Financial Institution Involved

Have you already reported the fraudulent activity to your financial institution? Yes or No

Have you completed an Affidavit of F who committed the fraudulent activi					
Have you closed the account/cancellor card(s) cancelled:					
Name of Institution:					
Address:					
Phone#:	e-mail:				
Contact Person:	Title:_				
Debit/Credit (Card and Account In	formation			
Do you have possession of your debit	c/credit card? Yes or No				
What kind of debit/credit card is it?					
Account number:					
Card number:					
Name on the card:					
Total amount of fraudulent activity/c	harges: \$				
Total amount reimbursed by the fina	ncial institution: \$				
Do you know where your debit/credit card may have been Lost or Stolen?					
Where was the last location you used	d the debit/credit card befo	re it was compromised?			
Does anyone else know your PIN# Ye					
If a Suspect is positively identified as	a relative, are you willing to	o prosecute? Yes or No			

List below each fraudulent charge/transaction:

Actual Date & Time	Name and/or Location Where Fraud Occurred	Amount

Please list ar your case:	ny other note	s or informat	ion you feel	is important	or pertinent	to

Please provide the following documents to be attached to this report:

- * Copy of your Account/Bank Statement with any fraudulent charges highlighted or underlined NOTE: Please obtain the actual transaction Date/Time/Amount/Address where Fraud occurred
- * Copy of the Affidavit of Fraud/Forgery (statement you signed attesting that you are not the person responsible for the fraud or charges)
- * Please fill out the Witness Statement Form on the next page.
- * Please do not sign it until it can be witnessed by a Police Officer

St. George Police Department

Incident	#		
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Statement Form

DATE	PLACE		TIME
NAME		DOB	PHONE
HOME ADDRESS_			
Read Carefully: 1	am making this statement	voluntarily and witho	out threat or coercion. All statements
	reliminary hearing. If I mak	•	vledge. I understand this statement hich I do not believe is true, I will be
I have read this st	atement and the facts co	ontained therein are	e true and correct.
Witnessing Police	Officer		gnature of person providing the atement.