Theft Affidavit						
Victim Information						
1. My full legal name is (First)	(Middle)	(Last)	(Jr.,Sr., III)			
2. (If different from above) When the	e events described in	this affidavit took p	olace, I was known as			
(First) (Mide	dle)	(Last)	(Jr., Sr., III)			
3. My date of birth is(day/month/	year)					
4. My Social Security Number is						
5. My driver's license or identification	n card state and num	ber are				
6. My current address is						
City	State	Z	Zip Code			
7. I have lived at this address since	(month/year)					
8. (If different from above) When the	e events described in	this affidavit took	place, my address			
was						
City	State	Zipc	code			
9. I lived at the address in Item 8 fro	munt (month/year)	il (month/year)				
10. My daytime telephone number is	()	·····				
My evening telephone number is	()					
How the Fraud Occurred						

# Check all that apply for items 11 – 17: 11.

I did not authorize anyone to use my name or personal information to seek the money, credit, loans, goods or services described in this report.

I did not receive any benefit, money, goods or services as a result of the events described in this report.

13.

My identification documents (for example, credit cards; birth certificates; driver's license; Social Security card; etc.) were:

Stolen I lost on or about

(day/month/year)

# 14

To the best of my knowledge and belief, the following person(s) used my information (for example, my name, address, date of birth, existing account numbers, Social Security number, mother's maiden name, etc.) or identification documents to get money, credit, loans, goods or services

Name (if known)	Name (if known)
Address (if known)	Address (if known)
Phone number(s) (if known)	Phone number(s) (if known)
Additional information	Additional information
do NOT know who used my information or	identification documents to get money, credit,

loans, goods or services without my knowledge or authorization

# 16.

15.

Additional comments: (For example, description of the fraud, which documents or information were used or how the identity theif gained access to your information)

Victim's Law Enforcement Actions	
17. (check only one)	on(s) who committed this fraud.
$\square$ I am NOT willing to assist in the prosecution of the	e person(s) who committed this fraud.
<ul> <li>18. (check only one)</li> <li>□ I am authorizing the release of this information to la them in the investigation and prosecution of the period of the investigation and prosecution of the period of the p</li></ul>	erson(s) who committed this fraud. n to law enforcement for the purposes of
<ul> <li>assisting them in the investigation and prosecution</li> <li>(check all that apply) I have have not repute he police or other law enforcement agency. The the event you have contacted the police or other the following information.</li> </ul>	orted the events described in this affidavit to e police $\Box$ did $\Box$ did not write a report. In
(Agency #1)	(Officer/Agency personnel taking report)
(Date of Report)	(Report number, if any)
(Phone number)	(email address, if any)
(Agency #2)	(Officer/Agency personnel taking report)

(Phone number)

(Date of Report)

(email address, if any)

(Report number, if any)

# Documentation Checklist

Please indicate the supporting documentation you are able to provide to the companies you plan notify. Attach copies (NOT originals) to the affidavit before sending it to the companies.

20.

A copy of a valid government-issued photo-identification card (for example, your driver's license, state-issued ID card, or your passport.) If you are under 16 and don't have a photo-ID, you may submit a copy of your birth certificate or a copy of your official school records showing your enrollment and place of residence.

21.

Proof of residency during the time the disputed bill occurred, the loan was made or the other event took

place (for example, a rental/lease agreement in your name, a copy of a utility bill or a copy of an insurance bill.

#### 22.

A copy of the report filed with the police or sheriff's department. If you are unable to obtain a report or report number from the police, please indicate that in Item 19. Some companies only need the report number, not a copy of the report. You may want to check with each company.

#### Signature

I certify that, to the best of my knowledge and belief, all the information on and attached to this affidavit is true, correct, and complete and made in good faith. I also understand that this affidavit or the information it contains may be made available to federal, state, and/or local law enforcement agencies for such action within their jurisdiction as they deem appropriate. I understand that knowingly making any false or fraudulent statement or representation to the government may constitute a violation of 18 U.S.C. 1001 or other federal, state or local criminal statutes, and may result in imposition of a fine or imprisonment or both

(signature)

(date signed)

(Notary)

[Check with each company. Creditors sometimes require notarization. If they do not, please have one witness (non-relative) sign below that you completed and signed this affidavit.]

### Witness:

(signature)

(printed name)

(date)

(telephone number)

# Fraudulent Account Statement

# **Completing the Statement**

- Make as many copies of this page as you need. Complete a separate page for each company you're notifying and only send it to that company. Include a copy of your signed affidavit.
- List only the account(s) you're disputing with the company receiving this form. See the example below.
- If a collection agency sent you a statement, letter or notice about the fraudulent account, attach a copy of that document (NOT the original).

I declare (check all that apply):

As a result of the event(s) described in the ID Theft Affidavit, the following account(s) was/were opened at your company in my name without my knowledge, permission or authorization using my personal information or identifying documents:

Creditor Name/Address (the company that opened the account or provided the goods or services)	Account Number	Type of unauthorized Credit/goods/services Provided by creditor (If known)	Date Issued or Opened (if known)	Amount/Value provided (the amount charged or the cost of the goods/services)
Example Example National Bank 22 Main Street Columbus, OH 22722	01234567- 89	Auto Loan	01/05/2002	\$25,500.00

During the time of the accounds described above, I had the following account open with your company:

Billing name:	:	
•		

Billing address:\_\_\_\_\_

Account number:\_\_\_\_\_