

**IDENTITY THEFT COMPLAINT FORM**  
**DALLAS POLICE DEPARTMENT – FORGERY SQUAD**  
1400 S. Lamar Street – 4<sup>th</sup> Floor  
DALLAS, TEXAS 75215  
PHONE 214-671-3543

**\*This information must be included.**

<b>*1. Complainant's Name</b>		<b>Complainant's Race/Sex/Age</b>	
<b>Complainant's Address</b> <hr/> <hr/>		<b>*Home Phone</b> <hr/> <b>*Work Phone</b> <hr/> <b>Cellular Phone</b> <hr/>	
<b>What is your Social Security Number?</b>		<b>What is your Drivers License Number?</b>	
<b>How were you notified that your identity was used?</b> <hr/> <hr/> <hr/> <hr/>			
<b>*What was the date your identity was first used?</b> <hr/>			
<b>*2. Identity used to:</b> <div style="display: flex; justify-content: space-between; margin-top: 10px;"> <div style="width: 45%;"> Obtain Credit/Card/s  Open Checking Account/s  Counterfeit Checks </div> <div style="width: 10%; text-align: center;"> <input type="checkbox"/>  <input type="checkbox"/>  <input type="checkbox"/> </div> <div style="width: 45%;"> Go to # 3  Go to # 4  Go to # 5 </div> </div>			
<b>3. If Used to Open Credit / Cards:</b> How was Credit applied for: <div style="display: flex; justify-content: space-between; margin-top: 10px;"> <div style="width: 35%;"> In Store    <input type="checkbox"/>  By Mail     <input type="checkbox"/>  By Phone    <input type="checkbox"/>  address,     <input type="checkbox"/>  By Internet </div> <div style="width: 65%;"> if so, what is the address of the Store _____  <hr/> Where were Credit cards sent:  Your address    <input type="checkbox"/>    to another address    <input type="checkbox"/>    if another  _____ What is that address?  _____ </div> </div>			
<b>If in a Store, who is teller or clerk who handled transaction: Name/phone number</b> <hr/>			
<b>Can they identify the suspect?</b>		<b>Does the store have video?</b>	
<b>*Do you have a copy of the credit card application?</b> <div style="text-align: right; margin-top: 10px;"> <input type="checkbox"/> Yes    <input type="checkbox"/> No </div>		<b>*Do you have copies of your credit report?</b> <div style="text-align: right; margin-top: 10px;"> <input type="checkbox"/> Yes    <input type="checkbox"/> No </div>	
<b>*Do you have documentation showing your information was used?</b> <div style="text-align: right; margin-top: 10px;"> <input type="checkbox"/> Yes    <input type="checkbox"/> No </div>			
<b>*YOU MUST PROVIDE ONE OF THESE ITEMS IN ORDER TO FILE A REPORT</b>			

**4. If to Open a Checking Account:**

How was account opened:

In person ☐

If so, what is the Bank and the address where the account was opened: \_\_\_\_\_

By phone ☐} ☐

what address were the checks sent to: \_\_\_\_\_

By Internet ☐If account opened in person who was the teller who handled the transaction: Name and contact phone number: \_\_\_\_\_ Can they identify the Suspect? ☐ ☐

Yes

No

**5. Counterfeit checks:**

What information was used:

Name ☐Address ☐Drivers License ☐Other ☐Was information printed on the checks? ☐ Yes ☐ No

Where was the check presented? Name and address of the Business : \_\_\_\_\_

Who is the teller? Name and contact phone number. \_\_\_\_\_

Can they Identify the suspect? ☐ Yes ☐ NoDoes the Business have video tape? ☐ Yes ☐ NoWas Identification presented? ☐ Yes ☐ NoIf so was it a: Drivers License/State issued Identification card ☐

Number \_\_\_\_\_

State \_\_\_\_\_

Alien registration Card ☐

Number \_\_\_\_\_

Social Security Card ☐

Number \_\_\_\_\_

Other type of identification ☐

What \_\_\_\_\_

**6. Suspect information:**

Name \_\_\_\_\_

Race / Sex / Age / Ht / Wt / Eyes / Hair / Clothes

**Do you know the suspect?**      ☐ **Yes**      ☐ **No**      **if Yes, what is their name and information:**

\_\_\_\_\_

**Has your information been used more than once? Explain**

**Is there any additional information you would like the Detective to have? Explain**