

Revised Cancelling Revised Cal. P.U.C. Sheet No. Cal. P.U.C. Sheet No. 30005-G 22988-G

dvice Letter No:	 Issued by	Date Filed	November 15, 20
	Please Refer to Attached Sample Form		
	Gas Sample Form No. 79-858 ID Theft Affidavit		(Т

3343-G 11-05-018

Issued by **Brian K. Cherry** Vice President Regulatory Relations Date Filed Effective Resolution No. November 15, 2012 November 15, 2012



To document fraud that resulted from ID Theft, please complete the following information, and supply the requested documentation.

Nan	ne			
PG8	&E Account Number			
VICT	IM INFORMATION			
(1)	My full legal name is	(Middle)	(Last)	Jr., Sr., III
(2)	(If different from above) When the events	described in this a	affidavit took place, I wa	as known as
(First)) (Middle)	(Last)	Jr., Sr., III
(3)	My date of birth is			
(4)	My social security number is		_	
(5)	My driver's license or identification card stat	e and number are	e	
(6)	My current address is			
	City	State	Zip Code	
(7)	I have lived at this address since(
(8)	(if different from above) When the events d			ldress was:
	City	_State	Zip Code	
(9)	I lived at the address from(month/y	until ear)	(month/year)	
(10)	My daytime telephone number is ()			
	My evening telephone number is ()			
RET	URN TO:			
F	PACIFIC GAS & ELECTRIC FRAUD DEPARTMENT P O BOX 8329 STOCKTON, CA 95208			

Automated Document, Preliminary Statement, Part A



Name

HOW THE F	RAUD OCCURRED		
(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.		
(12)	I did not reside at the address where the service was provided.		
(13)	I did not receive any benefit, money, goods or services as a result of the events described in this report		
(14)	My identification documents (for example, credit cards; birth certificate; driver's license, social security card; etc.) were stolen lost on or about(month/day/year)		
(15)	To the best of my knowledge and belief, the following person(s) used my information (for example, my <u>name</u> , address, <u>date of birth</u> , existing account, <u>social security number</u> , mother's maiden name, etc.) or <u>identification documents to get money</u> , <u>credit loans</u> , <u>goods</u> <u>or services</u> without my knowledge or authorization:		
Name (if kno	wn)	Name (if known)	
Address (if k	nown)	Address (if known)	
Phone numb	er(s) (if known)	Phone number(s) (if known)	
Additional inf	formation (if known)	Additional information (if known)	
(16) 🔲 (17) 🔲	loans, goods or services without my kr Additional comments: (For example	on or identification documents to get money, credit, nowledge or authorization. , description of fraud, which documents or tity thief gained access to your information.)	

(Attach additional pages as necessary)



Name

VICTIM'S LAW ENFORCEMENT ACTIONS

- (17) (check one) **I an I annot** willing to assist in the prosecution of the person (s) who committed this fraud.
- (18) (check one) I am I am not authorizing the release of this information to law enforcement for the purpose of assisting them in the investigation and prosecution of the person (s) who committed this fraud.
- (19) (check all that apply) I have I have not reported the events described in this affidavit to the police or other law enforcement agency. The police did did not write a report
- (20) You remain responsible for this/these bill(s) while our investigation is being conducted.
- (21) At the conclusion of our investigation you will be notified if you have been relieved of responsibility for this/these debt(s).

DOCUMENTATION CHECKLIST

Please attach copies **(NOT originals)** of the documents listed below to this affidavit. Please see page 6 for a list of acceptable documentation.

- (22) 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.
- (23) Proof of residency during the time the disputed bill occurred, for example, a rental/lease agreement in your name, a copy of a utility bill.
- (24) A copy of the report you filed with the police or sheriff's department must **be included**.



Name

SIGNATURE

I declare under penalty of perjury that the information I have provided in this affidavit is true and correct to the best of my knowledge.

(Signature)

(date signed

Knowingly submitting false information on this form could subject you to criminal prosecution for perjury.

Please have one witness (non-relative) sign below that you completed and signed this affidavit.

Witness:

(signature)

(printed name)

(date)

(telephone number)

Automated Document, Preliminary Statement, Part A



Name

Phone

Number

Fraudulent Account Statement

	Completing this Statement
•	Make as many copies of this page as you need. 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	Account Number	Address that Utility Service was provided by creditor	Date Service opened and closed	Amount/ of Bill(s)
Pacific Gas & Electric				

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

Billing name _____

Billing address _____

Account number _____

Automated Document, Preliminary Statement, Part A



Name

Phone No.

In order to resolve your disputed claim, you will need to provide one (1) form of identification from Category I (if US citizen) or Category II (if non US citizen.) and two (2) forms of proof of residency from Category III. You may choose from the list of acceptable documentation below:

Category I – Acceptable forms if	Category II – Acceptable forms of
identification for U.S. Citizen	identification for non U.S. Citizen
 Driver's License Military ID Military DD214 Form Military Selective Service Card Birth Certificate (not a hospital record) Native American Reservation ID Passport State ID Social Security Card ID from place of employment Current Student ID 	 Country ID Driver's License Military ID Passport US Immigration and Naturalization Service (INS) department documents: I-94 (Refugee arrival document) form I-688B (Employment Authorization Card) I-766 (employment Authorization approval) document US Government issued VISA (Document will state that it is a VISA) Note: Alien Registration Card is not acceptable.

You need two (2) forms of proof of residency from **Category III.** The proof of residency documents must be from **two (2) separate sources that cover the two (2) months** during the following dates *(these dates are the 2 months prior to the last final bill date)* you may choose from the list of acceptable documentation below:

•	Auto insurance policy or statement
•	Cable bill
•	Electric bill
•	Gas bill
•	Health insurance policy or statement (not a medical card)
•	Home owner's or renter's insurance policy or statement
•	Local Telephone bill (not a bill from a long distance provider,
	cellular or paging company
•	Life insurance policy or statement
•	Mortgage Statement
•	Water bill
•	Prison movement documentation
•	*Rental/Lease Agreement
	e will not accept rental receipts. The Rental/Lease agreement st be from a management company on an official lease agreement

*PLEASE RETURN THE COVER PAGE LETTER ALONG WITH AFFIDAVIT.

*(MAKE SURE THAT YOUR PROOF IS 2 MONTHS PRIOR TO THE LAST BILL DATE LOCATED ON THE COVER PAGE.

*YOUR AFFIDAVIT MUST BE SIGNED BY A WITNESS THAT IS NOT A RELATIVE, OR NOTARIZED.