

ID Theft Affidavit

Victim Information

1. My full legal name is _____
(First) (Middle) (Last) (Jr., Sr., III)
2. (If different from above) When the events described in this affidavit took place, I was known as _____
(First) (Middle) (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 card state and number are _____
6. My current address is _____
City _____ State _____ Zip Code _____
7. I have lived at this address since _____
(month/year)
8. (If different from above) When the events described in this affidavit took place, my address was _____
City _____ State _____ Zip Code _____
9. I lived at the address in Item 8 from _____ until _____
(month/year) (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.
12. I did not receive any benefit, money, goods or services as a result of the events described in this report.

Victim's Law Enforcement Actions

17. (check only one)

- I am willing to assist in the prosecution of the person(s) who committed this fraud.
- I am NOT willing to assist in the prosecution of the person(s) who committed this fraud.

18. (check only one)

- I am authorizing the release of this information to law enforcement for the purposes of assisting them in the investigation and prosecution of the person(s) who committed this fraud.
- I am NOT authorizing the release of this information to law enforcement for the purposes of assisting them in the investigation and prosecution of the person(s) who committed this fraud.

19. (check all that apply) I have 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. *In the event you have contacted the police or other law enforcement agency please complete the following information:*

(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)

(Date of Report)

(Report number, if any)

(Phone number)

(email address, 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 <small>(the company that opened the account or provided the goods or services)</small>	Account Number	Type of unauthorized Credit/goods/services Provided by creditor <small>(If known)</small>	Date Issued or Opened <small>(if known)</small>	Amount/Value provided <small>(the amount charged or the cost of the goods/services)</small>
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 accounts described above, I had the following account open with your company:

Billing name: _____

Billing address: _____

Account number: _____