## **ID Theft Affidavit**

## **Victim Information** 1. My full legal name is (Middle) (Last) (Jr.,Sr., III) 2. (If different from above) When the events described in this affidavit took place, I was known as (Middle) (Jr., Sr., III) (First) (Last) 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\_\_\_\_\_ 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: 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. 11. I did not receive any benefit, money, goods or services as a result of the events descibed in this report. 12.

	stolen lost on or abou	(day/month/year)
14.	my name, address, date of birth, eximaiden name, etc.) or identification	lief, the following person(s) used my information (for esting account numbers, Social Security number, mot documents to get money, credit, loans, goods or selon:
	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
	loans, goods or services without my Additional comments: (For example	ation or identification documents to get money, credir knowledge or authorization  e, description of the fraud, which documents or entity theif gained access to your information)
	loans, goods or services without my Additional comments: (For example	e, description of the fraud, which documents or
	loans, goods or services without my Additional comments: (For example	e, description of the fraud, which documents or
	loans, goods or services without my Additional comments: (For example	e, description of the fraud, which documents or
	loans, goods or services without my Additional comments: (For example	e, description of the fraud, which documents or
	loans, goods or services without my Additional comments: (For example	e, description of the fraud, which documents or
	loans, goods or services without my Additional comments: (For example	e, description of the fraud, which documents or
16.	loans, goods or services without my Additional comments: (For example	e, description of the fraud, which documents or

VICTIM'S Law Enforcement Actions			
17. (check only one)			
$\hfill\square$ 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 them in the investigation and prosecution of the	to law enforcement for the purposes of assisting e person(s) who committed this fraud.		
I am NOT authorizing the release of this inform assisting them in the investigation and prosect	nation to law enforcement for the purposes of ution of the person(s) who committed this fraud.		
or other law enforcement agency. The police $\square$	t reported the events described in this affidavit to the police did did not write a report. In the event you have gency 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 Attach copies (NOT originals) to the affidavit before	ou are able to provide to the companies you plan notify. ore sending it to the companies.		
20.			
.,	entification card (for example, your driver's license, u are under 16 and don't have a photo-ID, you may by of your official school records showing your		
21.			
	d bill occurred, the loan was made or the other event took in your name, a copy of a utility bill or a copy of an		

	eriffs department. If you are unable to obtain a report or that in Item 19. Some companies only need the report ant to check with each company.
Signature	
affidavit is true, correct, and complete and made information it contains may be made available to such action within their jurisdiction as they deem or fraudulent statement or representation to the	ge and belief, all the information on and attached to this e in good faith. I also understand that this affidavit or the offederal, state, and/or local law enforcement agencies for appropriate. I understand that knowingly making any false government may constitute a violation of 18 U.S.C. 1001 or d may result in imposition of a fine or imprisonment or both
(signature)	(date signed)
(Notary)	_
[Check with each company. Creditors sometime witness (non-relative) sign below that you comp	es require notarization. If they do not, please have one leted 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).

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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: