information

My email: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**At the Time of the Fraud**

Skip (8) - (10)

(8)

My full legal name was: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

if your

My evening phone: (\_\_\_\_)\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

First

Middle

credit report.

City

State

Zip Code

Country

(6)

I have lived at this address since \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

mm/yyyy

(7)

My daytime phone: (\_\_\_\_)\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

My daytime phone: (\_\_\_\_)\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ My evening phone: (\_\_\_\_)\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

City

State

Zip Code

Country

(10)

My email: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

The Paperwork Reduction Act requires the FTC to display a valid control number (in this case, OMB control #3084-0047)

before we can collect – or sponsor the collection of – your information, or require you to provide it.

H-1

My address was: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Last

Suffix

Apartment, Suite, etc.

has not

(9)

correct your

changed since

Number & Street Name

the fraud.

Last

you provide

First

Middle

blank until

Suffix

this form to

(2)

My date of birth: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

someone with

mm/dd/yyyy

1. Place a fraud alert on your credit reports, and review the reports for signs of fraud.

Average time to complete: 10 minutes

**Identity Theft Victim’s Complaint and Affidavit**

*A voluntary form for filing a report with law enforcement, and disputes with credit reporting agencies and creditors about*

*identity theft-related problems. Visit ftc.gov/idtheft to use a secure online version that you can print for your records.*

**Before completing this form:**

a legitimate

2. Close the accounts that you know, or believe, have been tampered with or opened fraudulently.

**About You** *(the victim)*

**Now**

Leave (3)

(1)

My full legal name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

police station

(5)

My current street address:

or sending

the form

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

to a credit

report at the

Number & Street Name

Apartment, Suite, etc.

reporting

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

agency to

are filing your

(3)

My Social Security number: \_\_\_\_\_\_\_\_-\_\_\_\_\_\_-\_\_\_\_\_\_\_\_\_\_

business need,

like when you

(4)

My driver’s license: \_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

State

Number

don’t have

complete

Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

information).

Suffix

Number & Street Name

Apartment, Suite, etc.

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

(14):

Enter what

you know

about anyone

you believe

was involved

(even if you

First

Middle

Last

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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H-2

Phone Numbers: (\_\_\_\_)\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (\_\_\_\_)\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

City

State

Zip Code

Country

Additional information about this person: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

other purpose — as described in this report.

obtain money, credit, loans, goods, or services — or for any

(12)

I

did

OR

did not receive any money, goods, services, or other benefit as a

*Page 2*

**About You** *(the victim) (Continued)*

**Declarations**

(11)

I

did

OR

did not

authorize anyone to use my name or personal information to

(14)

against the person(s) who committed the fraud.

**About the Fraud**

I believe the following person used my information or identification

documents to open new accounts, use my existing accounts, or commit other

fraud.

Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

(13)

result of the events described in this report.

*Victim’s Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Phone number* (\_\_\_\_)\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

I

am

OR

am not

willing to work with law enforcement if charges are brought

this form to

was made, or the other event took place (for example, a copy of a rental/lease

Proof of residency during the time the disputed charges occurred, the loan

agencies.

reporting

*acceptable.*

and credit

*a copy of your official school record showing your enrollment and legal address is*

creditors

when sending

documents

*If you are under 16 and don’t have a photo-ID, a copy of your birth certificate or*

license, state-issued ID card, or my passport).

A valid government-issued photo identification card (for example, my driver’s

of your identity

(B) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

H-3

Company Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Company Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Company Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

theft:

Credit inquiries from these companies appear on my credit report as a result of this identity

(18)

(C) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

(A) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

birth) in my credit report is inaccurate as a result of this identity theft:

The following personal information (like my name, address, Social Security number, or date of

(17)

**About the Information or Accounts**

agreement in my name, a utility bill, or an insurance bill).

used):

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

needed.

\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

sheets as

additional

\_

Attach

gained access to your information or which documents or information were

(14) and (15):

Additional information about the crime (for example, how the identity thief

(15)

\_ *Page 3*

\_\_\_\_\_\_\_\_\_\_\_\_

Attach copies

I can verify my identity with these documents:

(16)

(16): Reminder:

**Documentation**

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

*Victim’s Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Phone number* (\_\_\_\_)\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Total Amount Obtained ($)

*Account Number*:

The number of

the credit or

Date Discovered (mm/yyyy)

debit card, bank

Name of Institution

Contact Person

Phone

Extension

account, loan, or

other account

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

that was misused.

Select ONE:

Loan

frauds separately.

Government Benefits

Internet or Email

Other

*Contact Person*:

Someone you

Account Number Routing Number

dealt with, whom

This account was opened fraudulently.

an investigator

This was an existing account that someone tampered with.

can call about this

fraud.

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date Opened or Misused (mm/yyyy)

This account was opened fraudulently.

discovered the

problem.

This was an existing account that someone tampered with.

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

*Amount Obtained*:

For instance,

Date Opened or Misused (mm/yyyy)

Date Discovered (mm/yyyy)

and when you

Total Amount Obtained ($)

the total amount

purchased with

the card or

withdrawn from

the account.

H-4

Loan

Affected Check Number(s)

*Dates*: Indicate

Account Type:

Credit

Bank

Phone/Utilities

Phone/Utilities

when the thief

Government Benefits

Internet or Email

Other

began to misuse

your information

Select ONE:

Loan

attach as many

additional copies

Account Type:

Credit

Bank

Phone/Utilities

Affected Check Number(s)

as necessary

.

Government Benefits

Internet or Email

Other

Enter any

Name of Institution

(19)

Below are details about the different frauds committed using my personal information.

(19):

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

If there were

Select ONE:

Contact Person

Phone

Extension

more than three

frauds, copy this

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

page blank, and

Account Number Routing Number

Account Number Routing Number

Name of Institution

Contact Person

Phone

Extension

list the company

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

twice, giving

one company,

Affected Check Number(s)

the information

about the two

Account Type:

Credit

Bank

Date Discovered (mm/yyyy)

applicable

information that

This account was opened fraudulently.

you have, even if

This was an existing account that someone tampered with.

it is incomplete

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

or an estimate.

Date Opened or Misused (mm/yyyy)

*Victim’s Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Phone number* (\_\_\_\_)\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ *Page 4*

Total Amount Obtained ($)

If the thief

committed two

types of fraud at

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

officer and agency listed below.

State

Law Enforcement Department

face-to-face

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

instead of a

or the Internet,

telephone, mail,

example, by

interview with a

system, for

I filed my report in person with the law enforcement

automated

below.

H-5

Victim’s FTC complaint number (if available): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

No

Yes OR

Did the victim receive a copy of the report from the law enforcement officer?

Phone Number

Badge Number

(\_\_\_\_)\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Officer’s Signature

Officer’s Name (please print)

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Filing Date (mm/dd/yyyy)

Report Number

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

officer.

law enforcement

(20):

a report but law

you tried to file

person or get a copy of the official law enforcement report. Attach a copy of

was unable...” if

important to get your report number, whether or not you are able to file in

not to. Check “I

you have chosen

enforcement or

report with law

not yet filed a

not...” if you have

Check “I have

any confirmation letter or official law enforcement report you receive when

your signature and complete the rest of the information in this section. It’s

office, along with your supporting documentation. Ask an officer to witness

an Identity Theft Report by taking this form to your local law enforcement

detailed law enforcement report (“Identity Theft Report”). You can obtain

related information from appearing on your credit report is to submit a

One way to get a credit reporting agency to quickly block identity theft-

(20)

**Your Law Enforcement Report**

through an

I filed an automated report with the law enforcement agency listed

report filed

I was unable to file any law enforcement report.

enforcement

*Victim’s Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Phone number* (\_\_\_\_)\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ *Page 5*

A law

I have not filed a law enforcement report.

*Automated report:*

Select ONE:

refused to take it.

sending this form to credit reporting agencies.

enforcement

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signature

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Witness:**

Notary

does not, please have one witness (non-relative) sign that you completed and signed this Affidavit.

should also check to see if it requires notarization. If so, sign in the presence of a notary. If it

that you submit different forms. Check with each company to see if it accepts this form. You

you are not responsible for the fraud. While many companies accept this affidavit, others require

H-6

Telephone Number

Date

Theft Affidavit to prove to each of the companies where the thief misused your information that

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Printed Name

understand that knowingly making any false or fraudulent statement or representation to the

law enforcement agencies for such action within their jurisdiction as they deem appropriate. I

complaint or the information it contains may be made available to federal, state, and/or local

this complaint is true, correct, and complete and made in good faith. I understand that this

government may violate federal, state, or local criminal statutes, and may result in a fine,

I certify that, to the best of my knowledge and belief, all of the information on and attached to

(21)

**a witness.**

**As applicable, sign and date *IN THE PRESENCE OF* a law enforcement officer, a notary, or**

**Signature**

\_\_\_\_\_\_\_\_\_\_\_\_\_\_ *Page 6*

\_\_\_

If you do not choose to file a report with law enforcement, you may use this form as an Identity

(22)

**Your Affidavit**

Date Signed (mm/dd/yyyy)

*Victim’s Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Phone number* (\_\_\_\_)

Signature

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

imprisonment, or both.