

# IDENTITY 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 this address (No. 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.

13.  My identification documents (i.e., credit cards, birth certificate, driver's license, Social Security card, etc.) were  stolen  lost on or about \_\_\_\_\_  
(Day/Month/Year)

14.  To the best of my knowledge and belief, the following person(s) used my information (i.e., my name, address, date of birth, existing account numbers, Social Security number, mother's maiden name, etc.) or identification documents to obtain money, credit, loans, or goods and/or services without my knowledge or authorization:

\_\_\_\_\_  
Name (if known)

\_\_\_\_\_  
Name (if known)

\_\_\_\_\_  
Address (if known)

\_\_\_\_\_  
Address (if known)

\_\_\_\_\_  
Phone number(s) (if known)

\_\_\_\_\_  
Phone number(s) (if known)

\_\_\_\_\_  
Any additional information (if known)

\_\_\_\_\_  
Any additional information (if known)

15.  I do NOT know who used my information or identification documents to obtain money, credit, loans, or goods and/or services without my knowledge or authorization.

16.  Additional comments (i.e., description of the fraud, which documents or information were used, how the identity thief gained access to your information, etc.):

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

(Attach additional pages as necessary)

**VICTIM'S LAW ENFORCEMENT ACTIONS**

17. (Check one) I  am  am not willing to assist in the prosecution of the person(s) who committed this fraud.

18. (Check one) I  am  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  have not reported the events described in this affidavit to the police or other law enforcement agencies. The police  did  did not write a report.

In the event you have contacted the police or other law enforcement agencies, please complete the following:

\_\_\_\_\_  
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(s) you are able to provide to the companies you plan to 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, (i.e., driver’s license, state issued ID Card, passport, etc.). If you are under 16 and do not have a photo ID, you may submit a copy of your birth certificate or a copy of your official school record showing your enrollment and place of residence.
- 21.  Proof of residency during the time the disputed bill occurred, the loan was made or any other event took place, (i.e., 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 you filed with the police department. If you are unable to obtain a report or a report number from the police, please indicate in Item 19. Some companies only need the report number, not a copy of the report; you may want to check with each company.

**DOCUMENTATION CHECKLIST**

I certify that to the best of my knowledge and belief, all of the information on and attached to this affidavit is true, correct, 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 the imposition of a fine, or imprisonment, or both.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date signed

\_\_\_\_\_  
Notary

(Check with each company. Creditors may require notarization. If they do not, please have one witness, non-relative, sign below verifying that you completed and signed this affidavit.

Witness:

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Printed name

\_\_\_\_\_  
Date

\_\_\_\_\_  
Telephone number

**FRAUDULENT ACCOUNT STATEMENT**

- Make as many copies of this page as you need. **Complete a separate page for each company you are notifying and only send it to that company.** Include a copy of your signed affidavit.
- List only the account(s) you are disputing with the company receiving this form. **See example below.**
- If a collection agency sent you a statement, letter or notice regarding the fraudulent account, attach a copy of that document **(NOT) the original.**

**I declare (check what applies):**

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	Type of authorized credit/goods/services provided by creditor (if known)	Date issued or opened (if known)	Amount/Value provided (amount charged or the cost of the goods/service)
<b>Example:</b>				
National Bank of State 22 Main Street Columbus, Ohio 22722	01234567-89	Auto Loan	01/05/2007	\$25,500.00

on my open active account(s) someone, without my knowledge or permission, made changes to my account.

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

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

Account Number: \_\_\_\_\_

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