

ID THEFT AFFIDAVIT

NAME: _____ PHONE No. _____

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 _____
(day/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 #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 11-16)

(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 benefits, money, goods or services as a result of the events described in this report.

NAME: _____ PHONE No. _____

(13) _____ My identification documents
(for example, 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 (for
example, my name, address, date of birth, existing account numbers, Social Security number,
mother's maiden name, etc.) or identification documents to get money, credit, loans, goods 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)

(15) _____ I do NOT know who used my information or identification documents to get money, credit, loans,
goods or services without my knowledge or authorization.

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

(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 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:

_____	_____
(AGENCY #1)	(Office/Agency personnel taking report)
_____	_____
(Date of Report)	(Report Number, if any)
_____	_____
(Phone Number)	(E-Mail address, if any)

NAME: _____ PHONE No. _____

Documentation Checklist:

Please indicate the supporting documentation 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 (for example, your driver’s license, state-issued ID card or your passport). 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 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 you 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.

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.

[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)

COMMONWEALTH OF VIRGINIA

COUNTY/CITY OF _____

The foregoing instrument was acknowledged before me this _____ day of _____, 20____,

by _____
(Name of person seeking acknowledgment)

Notary Public
Notary registration number: _____
My commission expires: _____

NAME: _____ PHONE No. _____

Fraudulent Account Statement:

Completing this 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 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 <i>(the company that opened the account or provided the goods or services).</i>	Account Number	Type of unauthorized credit/goods/services provided by creditor <i>(if known).</i>	Date issued or opened <i>(if known).</i>	Amount/Value provided <i>(the amount charged or the cost of the goods/services).</i>
<i>Example: Example National Bank 22 Main Street Columbus, Ohio 22722</i>	<i>0123456-89</i>	<i>Auto loan</i>	<i>01/05/2010</i>	<i>\$25,500.00</i>

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

Billing name: _____

Billing address: _____

Account number: _____