

State of Hawaii Department of Labor and Industrial Relations Unemployment Insurance Division 830 Punchbowl St., Rm. 340, Honolulu, Hawaii 96813

DECLARATION OF IDENTITY THEFT

Complete this form if you received a 1099-G from the State of Hawaii, Department of Labor and Industrial Relations **AND** you did not file a claim for unemployment benefits. ____ First Name: ____(Print) MI: ______ Last name: ____ (Print) Social Security Number: _ (Last four digits only) Address: Telephone No. with area code: _____ (Home) _____ (Cell) Email: Please check all that apply: ☐ I did not file or attempt to reopen a claim for unemployment benefits with the information above. ☐ I did not receive any unemployment benefit payments. **ATTACHMENTS** IMPORTANT: Attach a copy of the 1099-G issued in your name. If available, attach copies of other documentation showing that a fraudulent claim for unemployment benefits was filed in your name. Examples of such documentation are a police report, report from the FTC, and IRS Form 14039 Identity Theft Affidavit. Certification: I _____ received a 1099-G from the (Print Name) State of Hawaii, Department of Labor and Industrial Relations and did not file a claim for unemployment benefits with the State of Hawaii for calendar year 2021, and declare under penalty of law that the foregoing is true and correct. Date: (Signature)

Mail completed form to: Department of Labor and Industrial Relations

Unemployment Insurance Division

Attn: Special Activities

830 Punchbowl Street, Room 340

Honolulu, Hawaii 96813