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:

- I. Place a fraud alert on your credit reports, and review the reports for signs of fraud.
- 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:					blank until
	First		Middle	Last	Suffix	you provide
(2)	My date of birth:					this form to
	My date of birth:	d/yyyy				someone with
$\langle 2 \rangle$						a legitimate
(3)	My Social Security number:		·			business need,
(4)	My driver's license:					like when you are filing your
()	My driver's license:		Number			report at the
						police station
(5)	My current street address:					or sending
						the form
	Number & Street Name			Apartment, Suit	e. etc.	to a credit
				1 /	,	reporting
						agency to
	City	State	Zip Code	C	ountry	correct your
(6)	I have lived at this address si	nce				credit report.
(-)			mm/yyyy			
(7)	My daytime phone: ()_					
()						
	My evening phone: ()					
	My email:					
At tl	he Time of the Fraud					
						Skip (8) - (10)
(8)	My full legal name was:					if your
()	, 6	First	Middle	Last	Suffix	information
	N4 11					has not
(9)	My address was: Numbe				<u> </u>	changed since
	Numbe	er & Street M	Name	Apartment,	Suite, etc.	the fraud.
	City	State	Zip Code	Co	ountry	
(10)	My daytime phone: (My av	ening phone: ()	
(\mathbf{v})	My daytime phone: () My evening phone: ()					
	My email:					
Th	e Paperwork Reduction Act requires th	ne FTC to dis	play a valid control r	number (in this case	e, OMB contro	ol #3084-0047)
	before we can collect – or spon	sor the colle	ection of $-$ your info	prmation or requi	re you to pro	vide it

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(14): Enter what you know about anyone you believe was involved (even if you don't have complete information).

About You (the victim) (Continued)

Declarations

(11)	Ι	□ did	OR	□ did not	authorize anyone to use my name or personal information to obtain money, credit, loans, goods, or services — or for any other purpose — as described in this report.
(12)	Ι	🗆 did	OR	□ did not	receive any money, goods, services, or other benefit as a result of the events described in this report.
(13)	Ι	🗆 am	OR	🗌 am not	willing to work with law enforcement if charges are brought against the person(s) who committed the fraud.

About the Fraud

(14)	I believe the following person used my information or identification
	documents to open new accounts, use my existing accounts, or commit other
	fraud.

Name: _				
	First	Middle	Last	Suffix
Address:				

Number & Street Name

City

Apartment, Suite, etc.

Country

State

Zip Code

Phone Numbers: (____)_____ (___)_____

Additional information about this person: _____

(14) and (15):

Attach additional

(15) Additional information about the crime (for example, how the identity thief gained access to your information or which documents or information were used):



Documentation

- (16) I can verify my identity with these documents:
 - □ A valid government-issued photo identification card (for example, my driver's license, state-issued ID card, or my passport).

If you are under 16 and don't have a photo-ID, a copy of your birth certificate or a copy of your official school record showing your enrollment and legal address is acceptable.

□ Proof of residency during the time the disputed charges occurred, the loan was made, or the other event took place (for example, a copy of a rental/lease agreement in my name, a utility bill, or an insurance bill).

(16): Reminder: Attach copies of your identity documents when sending this form to creditors and credit reporting agencies.

About the Information or Accounts

(17) The following personal information (like my name, address, Social Security number, or date of birth) in my credit report is inaccurate as a result of this identity theft:

(A) _	
(B)	
(C) _	

(18) Credit inquiries from these companies appear on my credit report as a result of this identity theft:

Company Name:	
Company Name:	
Company Name:	

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

				(19):
Name of Institution	Contact Person	Phone	Extension	If there were more than three frauds, copy this
Account Number	Routing Number	Affected Cl	heck Number(s)	page blank, and attach as many
· · ·	Bank DPhone/Utilitionent Benefits DInternet		her	additional copies as necessary.
Select ONE: This account was of This was an existing		Enter any applicable information that you have, even if it is incomplete or an estimate.		
Date Opened or Misused (mm/	yyyy) Date Discovered (mm	ı/yyyy) Total Amo	ount Obtained (\$)	If the thief
				committed two types of fraud at
Name of Institution	Contact Person	Phone	Extension	one company, list the company twice, giving
Account Number	Routing Number		heck Number(s)	the information about the two
Account Type: Credit	□Bank □Phone/Utilition Phone/Utilition Dent Benefits □Internet		her	frauds separately.
Select ONE: This account was c This was an existin		Contact Person: Someone you dealt with, whom an investigator can call about this fraud.		
Date Opened or Misused (mm/	yyyy) Date Discovered (mm	ı/yyyy) Total Amo	ount Obtained (\$)	Account Number: The number of
				the credit or debit card, bank
Name of Institution	Contact Person	Phone	Extension	account, loan, or other account
Account Number	Routing Number	Affected Ch	heck Number(s)	that was misused.
Account Type: Credit Governm Select ONE: This account was c This was an existin	Dates: Indicate when the thief began to misuse your information and when you discovered the problem.			
Date Opened or Misused (mm/	уууу) Date Discovered (mn	ı/yyyy) Total Amo	ount Obtained (\$)	Amount Obtained: For instance, the total amount purchased with the card or

withdrawn from the account.

Your Law Enforcement Report (20): (20)One way to get a credit reporting agency to quickly block identity theft-Check "I have related information from appearing on your credit report is to submit a not..." if you have detailed law enforcement report ("Identity Theft Report"). You can obtain not yet filed a report with law an Identity Theft Report by taking this form to your local law enforcement enforcement or office, along with your supporting documentation. Ask an officer to witness you have chosen your signature and complete the rest of the information in this section. It's not to. Check "I important to get your report number, whether or not you are able to file in was unable ... " if person or get a copy of the official law enforcement report. Attach a copy of you tried to file a report but law any confirmation letter or official law enforcement report you receive when enforcement sending this form to credit reporting agencies. refused to take it. Select ONE: Automated report: □ I have not filed a law enforcement report. A law enforcement □ I was unable to file any law enforcement report. report filed □ I filed an automated report with the law enforcement agency listed through an below. automated □ I filed my report in person with the law enforcement system, for officer and agency listed below. example, by telephone, mail, or the Internet, instead of a face-to-face Law Enforcement Department State interview with a law enforcement officer. **Report Number** Filing Date (mm/dd/yyyy) Officer's Signature Officer's Name (please print) Badge Number Phone Number Did the victim receive a copy of the report from the law enforcement officer? □Yes OR □No

Victim's FTC complaint number (if available):

Signature

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

(21) I certify that, to the best of my knowledge and belief, all of the information on and attached to this complaint is true, correct, and complete and made in good faith. I understand that this complaint 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 violate federal, state, or local criminal statutes, and may result in a fine, imprisonment, or both.

Signature

Date Signed (mm/dd/yyyy)

Your Affidavit

(22) If you do not choose to file a report with law enforcement, you may use this form as an Identity Theft Affidavit to prove to each of the companies where the thief misused your information that you are not responsible for the fraud. While many companies accept this affidavit, others require that you submit different forms. Check with each company to see if it accepts this form. You should also check to see if it requires notarization. If so, sign in the presence of a notary. If it does not, please have one witness (non-relative) sign that you completed and signed this Affidavit.

Notary

Witness:

Signature

Printed Name