

## INSTRUCTIONS FOR COMPLETING THE *ID THEFT AFFIDAVIT*

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To make certain that you do not become responsible for the debts incurred by the identity thief, you must provide proof that you did not create the debt where accounts were opened or used in your name.

A working group composed of credit grantors, consumer advocates and the Federal Trade Commission (FTC) developed this *ID Theft Affidavit* to help you report information to many companies using just one standard form. Use of this affidavit is optional for companies. While many companies accept this affidavit, others may require different forms. Before you send the affidavit, ask the company(ies) if this form is appropriate.

You may use this affidavit where a new account was opened in your name. The information will enable the companies to investigate the fraud and decide the outcome of your claim. (If someone made unauthorized charges to an existing account, call the company to find out what to do.)

This affidavit has two parts:

1. *ID Theft Affidavit* is where you report general information about yourself and the theft.
2. *Fraudulent Account Statement* is where you describe the fraudulent account(s) opened in your name. Use a separate *Fraudulent Account Statement* for each company you need to write to.

When you send the affidavit to the companies, attach copies (NOT originals) of any supporting documents (for example, driver's license, police report) you have. Before submitting your affidavit, review the disputed account(s) with family members or friends who may have information about the account(s) or access to them.

Complete this affidavit as soon as possible. Many creditors ask that you send it within two weeks of receiving it. Delaying could hinder the investigation.

Be as accurate and complete as possible and print clearly. You may choose not to provide some of the information requested; however, incorrect or incomplete information will impede the investigation of your claim.

When you have completed the affidavit, mail a copy to each creditor, bank or company that provided the thief with the unauthorized credit, goods or services you claim. Attach to each affidavit a

copy of the *Fraudulent Account Statement* with information only on accounts opened at the institution receiving the packet, as well as any other supporting documentation.

Send the appropriate documents to each company by certified mail, return receipt requested, so you have proof of receipt. The companies will review your claim and send you a written response telling you the outcome of their investigation. Keep a copy of everything you submit for your records.

If you cannot complete the affidavit, a legal guardian or someone with power of attorney may complete it for you. Except as noted, the information you provide will be used only by the company to process your affidavit, investigate the events you report and help stop further fraud. If this affidavit is requested in a lawsuit, the company might have to provide it to the requesting party.

**Completing this affidavit does not guarantee that the identity thief will be prosecuted or that the debt will be cleared.**

## ID THEFT AFFIDAVIT

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 the address in Item 8 from \_\_\_\_\_ (month/year) until \_\_\_\_\_ (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 (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)
_____ additional information (if known)	_____ additional information (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 was used or how the identity thief gained access to your information.)

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(Attach additional pages as necessary)

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 the 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:*

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(Agency #1)

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(Officer/Agency personnel taking report)

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(Date of report)

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(Report number, if any)

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(Phone number)

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(email address, if any)

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(Agency #2)

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(Officer/Agency personnel taking report)

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(Date of report)

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(Report number, if any)

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(Phone number)

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(email address, if any)

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## DOCUMENTATION CHECKLIST



Please indicate the supporting documentation you will 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 an official school document 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. By submitting this report to the Attorney General, I am also requesting an "Identity Theft Passport". 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.
- ( ) 23. A certified copy of the court order I have obtained to expunge any charges, arrest record and/or conviction falsely entered against me. By submitting this court order to the Attorney General, I am also requesting an "Identity Theft Passport".

**SIGNATURE**

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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.

\_\_\_\_\_  
Notary Public

[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 No: \_\_\_\_\_