RICHARD CORDRAY, OHIO ATTORNEY GENERAL

### Instructions for Completing the ID Theft Affidavit

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 to each of the companies 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 require that you submit more or different forms. Before you send the affidavit, contact each company to find out if they accept it.

You can 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:

- *ID Theft Affidavit* is where you report general information about yourself and the theft.
- 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 (e.g., 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 slow the investigation.

Be as accurate and complete as possible. You *may* choose not to provide some of the information requested. However, incorrect or incomplete information will slow the process of investigating your claim and absolving the debt. Please print clearly.

When you have finished completing the affidavit, mail a copy to each creditor, bank or company that provided the thief with the unauthorized credit, goods or services you described. 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 you are able to provide.

Send the appropriate documents to each company by certified mail, return receipt requested, so you can prove that they were received.

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.

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# DO NOT SEND AFFIDAVIT TO THE FTC OR ANY OTHER GOVERNMENT AGENCY



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If you have not already done so, report the fraud to the following organizations:

- Each of the three national consumer reporting agencies listed below. Ask each agency to place a "fraud alert" on your credit report and send a copy of your credit file. When you have completed your affidavit packet, you may want to send them a copy to help them investigate the disputed accounts.
  - Equifax Credit Information Services, Inc. (800) 525-6285
     TDD: (800) 255-0056 and ask the operator to call the Auto Disclosure Line at (800) 685-1111 to obtain a copy of your report.
     P.O. Box 740241
     Atlanta, GA 30374-0241
     www.equifax.com
  - Experian Information Solutions, Inc. (888) 397-3742
     TDD: (800) 972-0322
     P.O. Box 9530
     Allen, TX 75013
     www.experian.com
  - TransUnion
    (800) 680-7289
    TDD: (877) 553-7803
    Fraud Victim Assistance Division
    P.O. Box 6790
    Fullerton, CA 92634-6790
    www.transunion.com

- The fraud department at each creditor, bank, or utility/service that provided the identity thief with unauthorized credit, goods or services. This would be a good time to find out if the company accepts this affidavit, and whether they require notarization or a copy of the police report.
- 3. Your local police department. Ask the officer to take a report and give you a copy of the report. Sending a copy of your police report to financial institutions can speed up the process of absolving you of wrongful debts or removing inaccurate information from your credit reports. If you can't get a copy, at least get the number of the report.
- 4. The Federal Trade Commission (FTC), which maintains the Identity Theft Data Clearinghouse the federal government's centralized identity theft complaint database and provides information to identity theft victims. You can visit www.consumer.gov/idtheft or call toll-free (877) ID-THEFT, [(877) 438-4338].

The FTC collects complaints from identity theft victims and shares their information with law enforcement nationwide. This information also may be shared with other government agencies, consumer reporting agencies and companies where the fraud was perpetrated to help resolve identity theft-related problems.

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## IDENTITY THEFT AFFIDAVIT

### VICTIM INFORMATION

1.	My full legal name is:					
	First	Middle	Last		Jr., Sr., II	
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:		Month/Day/Year			
4.	My Social Security number is:					
5.	My driver's license or state identific	ration card number is:				
6.	My current address is:					
	Street	City		State	ZIP	
7.	I have lived at this address since:		Month/Day/Year			
8.	(If different from above) When the events described in this affidavit took place, my address was:					
	Street	City		State	ZIP	
9.	I lived at the address in Item 8 from	Month/Yea	until	Moi	nth/Year	
10.	My daytime telephone number is: (	)				
	My evening telephone number is: (	)				

Name			Phone Number	Page 2		
		Hown	THE FRAUD OCCURRED			
Check	all th	nat apply for items 11-16:				
11.		I did not authorize anyone to us goods or services described in the	se my name or personal information to seek the money, cred his report.	lit, loans,		
12.		I did not receive any benefit, mo	ney, goods or services as a result of the events described in the	nis report.		
13.		My identification documents (for example, credit cards, birth certificate, driver's license, Social Security card, etc.) were:				
		☐ Stolen				
		☐ Lost				
		On, or about:Month	n/Year			
14.		address, date of birth, existing a	I belief, the following person(s) used my information (e.g., my account numbers, Social Security number, mother's maiden get money, credit, loans, goods or services without my know	name, etc.)		
		Name (if known)	Name (if known)			
		Address (if known)	Address (if known)			
		Phone number(s) (if known)	Phone number(s) (if known)			
			Additional information			
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 (e.g., description of the fraud, which specific documents or information used or how the identity thief gained access to your information).				

(Attach additional pages as necessary.)

		Victim's Law	Enforcement Actions
17	7. (ch	eck one)	
	. (-	☐ I am ☐ I am NOT	
		willing to assist in the prosecution of	of the person(s) who committed this fraud.
18	8. (ch	eck one)	•
	» (CII	☐ I am NOT	
			mation to law enforcement for the purpose of assisting them in
		S .	he person(s) who committed this fraud.
10	) (ch	eck all that apply)	1
1.	). (CII	☐ I have ☐ I have NOT	
			s affidavit to the police or other law enforcement agency.
		_	sumauvit to the ponce of other law emoreement 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		(Officer/agency personnel taking report)
			_
	(Date of report)		(Report number, if any)
	(Phone number)		(E-mail address, if any)
		Agency #2	(Officer/agency personnel taking report)
			_
		(Date of report)	(Report number, if any)
		(Phone number)	(E-mail address, if any)
		Doc	UMENTATION
P14	aso i	ndicate the supporting documentation	you are able to provide to the companies you plan to notify.
		ies (NOT originals) to the affidavit befor	
20.		A copy of a valid government-issued	photo-identification card (e.g., your driver's license, state-issued
20.			under 16 and don't have a photo ID, you may submit a copy of
			r official school records showing your enrollment and place of
		residence.	7
21			disputed hill assured the last was made on the other event
21.		, ,	e disputed bill occurred, the loan was made or the other event tent in your name, a copy of a utility bill or a copy of an insur-
		ance bill).	ient in your name, a copy of a utility off of a copy of an insur-
00		,	
22.			e police or sheriff's office. If you are unable to obtain a report or
			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.

Phone Number \_

Page 3

Name \_

Name	Phone Number	Page 4
	Signature	
I declare, under penalty of pethe best of my knowledge.	rjury, that the information I have provided in this affiday	vit is true and correct to
(Signature)	(Date Signed)	
Knowingly submitting falso perjury.	e information on this form could subject you to crim	ninal prosecution for
(Notary)		
[Check with each company	c. Creditors sometimes require notarization. If they d	lo not inlease have one
	ow that you completed and signed this affidavit.]	to not, please have one
Witness:		
(Signature)	(Printed Name)	
(Date)	(Telephone Number)	

Name	e Phone Number Page						
FR	AUDULENT A	Account Stat	EMENT				
Completing this Stateme	nt						
<ul> <li>Make as many copies of this page as you need. Complete a separate page for each company you're notifying and only send it to that company. Include a copy of your signed affidavit.</li> </ul>							
List only the account(s)							
If a collection agency so of that document (NOT)		letter or notice about the f	fraudulent acco	ount, attach a copy			
I declare (check all that a	apply):						
opened at your cor	* /	he <i>Identity Theft Affidavit,</i> vithout my knowledge, pe cuments:	_	* *			
Creditor name/address (the company that opened the account or provided the goods or services):	Account number:	Type of unauthorized credit/goods/services provided by creditor (if known):	Date issued or opened (if known):	Amount/value provided (the amount charged or the cost of the goods/services):			
EXAMPLE: Example National Bank 22 Main Street Columbus, OH 22722	01234567-89	auto loan	01/05/2002	\$25,500			
company:		bove, I had the following	-	with your			
Billing name:							
Billing address:							
Account number:	Account number:						

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