

Sample ID Theft Affidavit
Excerpted from [Case Management Workbook](#)
for victims of ID theft and fraud

Caution: Since your Affidavit may be sent to dozens, even hundreds of places where absolutely no guarantee of privacy or security exists, it is dangerous to spread your birth date, social security number and state ID or driver's license information around unless the recipient actually requires it to prove that the information they have relied upon is fraudulent. The sample Affidavit provided here gives you the option of including the information or indicating it will be provided upon request.

Since you may be sending many, many affidavits, and having documents notarized is expensive, you may be able to have one affidavit notarized and furnish copies of that.

We strongly advise against uploading this form to any internet site for conversion to a fillable internet form unless the conversion site guarantees 100% security of your information.

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

ID Theft Affidavit Page 1.

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 furnished on request or (day/month/year) _____

(4) My Social Security number is furnished on request or _____

(5) My driver's license or ID card state and number are furnished on request or _____

(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 _____ 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 - 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 with out 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 were used or how the identity thief gained access to your information.)

(Attach additional pages as necessary.)

ID Theft Affidavit Page 2.

Name _____ Phone no. _____

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)	(Officer/Agency personnel taking report)
(Date of report)	(Report number, if any)
(Phone number)	(email address, if any)
(Agency #2)	(Officer/Agency personnel taking report)
(Date of report)	(Report number, if any)
(Phone number)	(email address, if any)

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 don't 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.

ID Theft Affidavit Page 3.

Name _____ Phone no. _____

Signature

I certify that, to the best of my knowledge and belief, all the information on and attached to this affidavit is true, correct, and complete and made in good faith. I also understand that this affidavit 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 constitute a violation of 18 U.S.C. §1001 or other federal, state, or local criminal statutes, and may result in imposition of a fine or imprisonment or both.

(signature of Affiant)

(printed name of Affiant)

(date signed)

[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 of Witness)

(printed name of Witness)

(date signed)

(telephone number)

Subscribed and sworn to before me, this _____ [day of month] day of _____ [month], 20____.

[Notary Seal:]

[signature of Notary]

[printed name of Notary]

NOTARY PUBLIC

My commission expires: _____, 20____.