

# ***CLARE CITY POLICE***

## **IDENTITY THEFT VICTIM INFORMATION FORM**

*Please complete this form and return it to the police agency as soon as possible, or bring it to the meeting with the investigator assigned to your case. The information you provide will be used to understand what occurred, organize the investigative case, determine where evidence might be found, develop a theory of how the identity crime occurred, and determine what financial institutions should be contacted in the course of the investigation. Identity theft cases require the assistance of all victims involved, as accurate personal account information is only known by the victim, it is impossible for investigators to determine the legitimacy of accounts without their assistance. In many cases, the investigation cannot not begin until the investigator receives information requested within this form.*

**LAW ENFORCEMENT INCIDENT  
NUMBER**

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**Current Date:** \_\_\_\_\_  
**First Name:** \_\_\_\_\_ **Middle:** \_\_\_\_\_ **Last:** \_\_\_\_\_  
**Social Security #:** \_\_\_\_\_ **Driver's License#** \_\_\_\_\_  
**Date of Birth:** \_\_\_\_\_  
**Home Address:** \_\_\_\_\_  
**Home Telephone #:** \_\_\_\_\_ **Cell #** \_\_\_\_\_ **Pgr #** \_\_\_\_\_  
**E-Mail Address:** \_\_\_\_\_  
**Employer:** \_\_\_\_\_  
**Work Address:** \_\_\_\_\_  
**Work Telephone #:** \_\_\_\_\_

**1. How did you become aware of the identity crime? (Briefly describe within this section. Describe in detail within the attached timeline).**

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**2. What date did you first become aware of the identity crime?**

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**3. When did the fraudulent activity begin?**

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**4. What is the full name, address, birth date, and other identifying information that the fraudulent activity was made under?**

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**5. Are you aware of any documents and/or identifying information that were stolen and/or compromised (credit cards, ATM cards, checks, driver's license, etc...)?**

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**6. To assist law enforcement in pinpointing when and by whom your information was compromised, it is of value to retrace your actions in recent months with regard to your personal information. This information is not solicited to "blame the victim" for the crime, but to further the investigation toward who might have stolen your personal or financial identifiers. What circumstances and activities have occurred in the last six months (include activities done by you and on your behalf by a member of your family or a friend)?**

- Carried Social Security Card in my wallet
  - Carried my bank account passwords, PINs, or codes in my wallet
  - Gave out my Social Security Number (To whom?)
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My mail was stolen (Approximate date?)

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- I went away and my mail held at the post office or collected by someone else
  - I traveled to another location outside my home area  
(Where did you go and when?)
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Mail was diverted from my home (either by forwarding order or in a way unknown to you)

I did not receive a bill as usual (i.e., a credit card bill failed to come in the mail)  
(Which one?)

Documentation with my personal information was thrown in the trash without being shredded

Credit card bills, pre-approved credit card offers, or credit card "convenience" checks in my name were thrown out without being shredded

My garbage was stolen or gone through

My ATM receipts and/or credit card receipts were thrown away without being shredded

My password or PIN was given to someone else

My home was burglarized

My car was stolen or burglarized

My purse or wallet was stolen

My checkbook was stolen

I recently provided my personal information to a new source. Please list source.

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My personal information was given to a telemarketer or a telephone solicitor  
Please list:

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My personal information was given to a door-to-door salesperson or charity fundraiser.  
Please list:

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A charitable donation was made using my personal information

**Please list:**

\_\_\_\_\_ **My personal information was given to enter a contest or claim a prize I had won**

**Please list:**

\_\_\_\_\_ **I recently opened a new bank account or new credit card account.**

**Please list:**

\_\_\_\_\_ **I re-financed my house or property (Please List)**

\_\_\_\_\_ **Online purchases were made using my credit card (Through what company?)**

**My personal information was recently included in an e-mail**

\_\_\_\_\_ **I released personal information to a friend or family member.**

**For any items checked above, please, in as much detail as possible, explain the circumstances of the situation:**

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**7. How many purchases over the Internet (retailer or auction sites) have you made in the last six months? \_\_\_\_\_**

**8. What Internet sites have you bought from? (List all)**

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**9. In the last six months, whom has your Social Security number been given to? (List all)**

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**10. Do your checks have your Social Security number or Driver's License number imprinted on them?**

**Yes. (Please list retailer names where checks have been tendered)**

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**No.**

**11. Have you written your Social Security Number or Driver's License Number on any checks in the last six months, or has a retailer written those numbers on a check?**

**Yes. Please list instances and retailer names:**

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**No.**

**12. Do you own a business(es) that may be affected by the identity crime?**

**Yes. Please list names of businesses:**

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**No.**

**13. Do you have any information on a suspect in this identity crime case? \_\_\_\_\_**

**How do you believe the theft occurred? \_\_\_\_\_**

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**14. Please list all fraudulent accounts that were obtained by use of your name and/or personal identity information (If multiple accounts, please include on time line)**

*Type of account and account number*

*Bank (checking, savings, brokerage, pension, etc.) \_\_\_\_\_ Fraudulent charges?*

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**15. Please list all legitimate accounts in your name/personal identity information which have incurred fraudulent charges/activity.**

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**16. Please list any documents fraudulently obtained in your name (driver's licenses, social security cards, etc.)**

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**17. Have you contacted the following organizations and requested a Fraud Alert be put on your account? (Check all that you have contacted about a Fraud Alert)**

**Equifax. Date of contact?** \_\_\_\_\_

**TransUnion. Date of contact?** \_\_\_\_\_

**Experian. Date of contact?** \_\_\_\_\_

**Secretary of State / Department of Motor Vehicles**

**Social Security Administration**

**Other (Please list):** \_\_\_\_\_

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**18. Have you requested a credit report from each of the three credit bureaus? (Check all that you have requested a credit report from)**

**Equifax (If you have in your possession, please attach to this form)**

**TransUnion (If you have in your possession, please attach to this form)**

**Experian (If you have in your possession, please attach to this form)**

**19. Have you contacted any financial institution, concerning either legitimate or fraudulently opened accounts? If yes, please list:**

*Name of financial institution Phone number Person you spoke with*

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# TIME LINE

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- **Please bring with you to the meeting with the Investigator: all account documents, letters, correspondence, phone records, credit reports and other documents regarding this case.**
  
- **Please make a copy of this completed form for your records.**
  
- **Keep and maintain a detailed log of all your correspondence and contacts since completing this form. Keep and maintain all original copies of correspondence related to the crime.**



# VICTIM ASSISTANCE INFORMATION

## Credit Bureaus:

**Equifax:** [www.equifax.com](http://www.equifax.com)  
Report Fraud: Call (800) 525-6285  
and write to: PO Box 740250,  
Atlanta, GA 30374  
Order a credit report: (800) 685-  
1111

**Experian:** Formerly TRW  
[www.experian.com](http://www.experian.com)  
Report Fraud: Call (888) 397-3742  
and write to: PO Box 1017, Allen,  
TX 75013  
Order a credit report: (888) 397-  
3742.

**TransUnion:** [www.transunion.com](http://www.transunion.com)  
Report Fraud: (800) 680-7289  
and write to: PO Box 6790,  
Fullerton, CA 92834  
Order Credit Report: (800) 888-  
4213  
Credit Fraud victims are entitled to  
a free copy of their credit report. By

law, a credit bureau can't charge  
more than \$9 per credit report.

## Report Fraudulent Use Of Checks:

CheckRite/Global Payments: (800)  
638-4600 x555  
Tele-Check: (800) 710-9898  
To find out if the identity thief has  
been passing bad  
checks in your name, call: SCAN  
(800) 262-7771

## Report Phone Fraud:

888-CALL-FCC (888-225-5322)  
[www.FCC.gov](http://www.FCC.gov)

## OPT OUT of Pre-Approved Credit Offers:

Call: (888) 5OPTOUT or (888) 567-  
8688.

## Remove Your Name From Mail and Phone Lists:

Direct Marketing Association  
Mail Preference Service, PO Box  
9008, Farmingdale, NY 11735  
Telephone Preference Service, PO  
Box 9014 Farmingdale, NY 11735

## Federal Resources:

Federal Trade Commission: Call the  
FTC ID Theft Hotline  
(877) FTC-HELP (382-4357) for  
help with a consumer complaint.

## Social Security Administration

Report Fraud: (800) 269-0271 or  
report online at [www.ssa.gov/oig](http://www.ssa.gov/oig)  
Order Earnings and Benefits  
Statement: (800) 772-1213

## TIPS FOR PREVENTING ID THEFT:

Never give out identifying information in response to  
unsolicited offers by phone, mail, internet, or in person  
unless you initiate the contact.  
Order & review your credit report yearly.  
Review financial and credit card statements monthly for  
unauthorized activity.  
Shred or tear up discarded paperwork containing personal  
identifiers (i.e. receipts, insurance forms, bank & credit  
card statements, cash advance checks) before discarding.  
Protect your mail by removing it from your mailbox as  
soon as possible. Place your mail delivery on hold at the  
post office while you're away on vacation.  
Be aware of where your personal identification is kept and  
who has access to it – at work and at home.  
Protect your wallet/purse and don't leave them unattended.  
Limit the number of credit cards carried, and don't carry  
your PIN or social security card in your wallet/purse.  
Treat checkbooks, ATM cards, credit cards & credit card  
offers as if they were cash. Cancel unneeded credit cards.  
Don't put your social security number, phone number or  
date of birth on your checks.  
When using the internet to make purchases, look for the  
"s" in the address (https) to ensure a secure site.

## ADDITIONAL USEFUL WEB SITES:

**Michigan State Police:** [www.michigan.gov/msp](http://www.michigan.gov/msp)

**Federal Trade Commission (FTC):** [www.ftc.gov](http://www.ftc.gov)

**FTC Consumer's Page:** [www.consumer.gov/idtheft](http://www.consumer.gov/idtheft)

**US Postal Service:** [www.usps.com](http://www.usps.com)

**Id Theft Resources Center:** [www.idtheftcenter.org](http://www.idtheftcenter.org)

**Privacy Rights Clearinghouse** [www.privacyrights.org](http://www.privacyrights.org)

**American Express** [www10.americanexpress.com](http://www10.americanexpress.com)

**Discover** [www.discovercard.com/discover/data](http://www.discovercard.com/discover/data)

**Mastercard** [www.mastercard.com/education/fraud](http://www.mastercard.com/education/fraud)

**Visa** [www.usa.visa.com/personal](http://www.usa.visa.com/personal)

**CLARE CITY POLICE DEPARTMENT  
AFFIDAVIT OF FRAUD AND FORGERY**

Name: <i>(Last, First, Middle)</i>		Social Security No.	
DOB:	Drivers License No.	State:	
Current Address:			
City:	State:	Zip code	Apt No.
Daytime Phone:	Evening Phone:		
Address where events took place (if different from above):			

- I did not authorize anyone to use my name or personal information to seek money, credit, loans, goods or services.
- I did not receive any benefits, money, goods or services as a result of the events described in this report.
- I am willing to assist in the prosecution of the person(s) who committed this fraud.
- I authorize the release of credit and/or other information to law enforcement for the purpose of assisting them in the investigation and prosecution of the person(s) who committed this fraud.

\*\*\*\* Complete the following in front of a Notary Public \*\*\*\*

Complainant's Signature:	Date:
Witness Signature:	Date:
Printed Name <i>(witness)</i> :	

Subscribed and sworn before me the \_\_\_\_\_ day of \_\_\_\_\_  
Month Year

\_\_\_\_\_  
*(Notary Signature)*

Notary Public in and for the County Of \_\_\_\_\_ Michigan.

My Commission Expires \_\_\_\_\_