



Lynn Fitch
ATTORNEY GENERAL

If You're a Victim of Identify Theft.....

If you believe that you are a victim of identity theft, complete the following checklist in order to protect yourself immediately against any future abuses of your identity, begin an official investigation of the theft, and repair any damage your credit sustained.

- **Contact your local police department and file a report of the theft.** Obtain a copy of the report for your records and to assist in clearing your name. **Your local police will be your first line of defense.** Our office will open the lines of communication and provide assistance as needed with their investigation.
- **Contact any creditors** of the accounts that you believe have been corrupted or fraudulently opened. Ask to speak with the fraud or security department and inform them of the theft. Immediately close any existing accounts. Follow up the call with a letter.
- **Contact the fraud department of one of the three major credit bureaus.** Inform them that you are an identity theft victim and that you wish to place a fraud alert on your file, as well as a victim's statement requesting a call to you by the credit bureaus before opening or changing credit accounts. Also, request a copy of your credit report. As a result of this one request, all three major credit bureaus will send you a copy of your credit report. To request a free copy of your credit report go to www.annualcreditreport.com or call Equifax (800) 685-1111, Experian (888) 397-3742 and TransUnion (800) 680-7289.
- **File a report with the Federal Trade Commission** www.consumer.gov/idtheft or 1-877-438-4338, the FTC's Identity Theft Hotline.
- **Complete the enclosed "ID Theft Affidavit"** and mail it to:

**Mississippi Attorney General's Office
Consumer Protection Division
P. O. Box 22947
Jackson, MS 39225**

- **Include with your Affidavit a copy of any documents relating to your identity theft including collection letters, police reports and credit reports. Include a Proof of Residency (light bill, gas bill, phone bill, etc.) at the time the theft occurred and a Photo ID. It is imperative that you complete the ID Theft Affidavit and return it along with supporting documents to the address above in order that a criminal investigation may be initiated.**

If you need additional assistance, you may also contact the Consumer Protection Division of the Attorney General's Office at 601-359-4230 or 1-800-281-4418.

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 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.)

(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:*

(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 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

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: _____

FRAUDULENT ACCOUNT STATEMENT

COMPLETING THIS STATEMENT

- ☛ Make as many copies of this page as you need. **Complete a separate page for each company you are notifying and only send it to that company.** Include a copy of your signed affidavit.
- ☛ List only the account(s) you are disputing with the company receiving this form. **See the example below.**
- ☛ If a collection agency sent you a statement, letter or notice about the fraudulent account, attach a copy of that document (**NOT** the original).

I declare (check all that apply):

- () As a result of the event(s) described in the *ID Theft Affidavit*, the following account(s) was/were opened at your company in my name without my knowledge, permission or authorization using my personal information or identifying documents:

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) National Bank 22 Main Street Columbus, Ohio 22722	(Example) 01234567-89	(Example) auto loan	(Example) 01/05/2002	(Example) \$25,500.00

- () During the time of the accounts described above, I had the following account open with your company:

Billing Name: _____ Account No: _____
 Billing Address: _____ Telephone No: _____

BANKS, CREDIT CARD ISSUERS AND OTHER CREDITORS (Contact each creditor promptly to protect your legal rights.)

Creditor	Address and Phone Number	Date Contacted	Contact Person	Comments
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