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## **AFFIDAVIT OF IDENTITY THEFT**

### *Victim Information:*

My full legal name is \_\_\_\_\_ and I was born on \_\_\_\_\_. My social security number is \_\_\_\_\_. My driver's license or state ID number is \_\_\_\_\_.

I have lived at the following address since \_\_\_\_\_:

\_\_\_\_\_

The best way to contact me is through the following:

\_\_\_\_\_

### *Description of Identity Theft:*

The identity theft happened in the following manner:

\_\_\_\_\_

To the best of my knowledge and belief, the following person used my information or identification documents to get benefits, money, goods, and/or services without my knowledge or authorization:

\_\_\_\_\_

### *Law Enforcement Actions:*

I am willing to assist to the best of my abilities in the prosecution of the person(s) who

committed this fraud.

I am authorizing the release of this information to any law enforcement officials for the purpose of assisting them in their investigation and prosecution of any persons involved in this fraud.

I have reported this fraud to the police or other law enforcement agencies. I have attached the police report to this affidavit.

*Supporting Documentation:*

I am providing the following supporting documentation:

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Date

Subscribed and sworn (or affirmed) to before me on this \_\_\_\_\_ day of

\_\_\_\_\_, \_\_\_\_\_.

\_\_\_\_\_

Signature, Notary Public