

# Identity Theft Complaint Form



RETURN TO: Attorney General's Office  
Consumer Protection Unit, PO Box 899  
Jefferson City, MO 65102

Missouri Attorney General  
Chris Koster

Phone: 800-392-8222  
Web: ago.mo.gov

DATE THIS FORM WAS FILLED OUT (MM DD YY) \_\_\_\_\_  
MONTH DAY YEAR

- MR.  
 MRS.  
 MS.

YOUR NAME \_\_\_\_\_  
FIRST MIDDLE LAST

HOME ADDRESS \_\_\_\_\_  
STREET CITY STATE ZIP

HOME PHONE ( ) \_\_\_\_\_ CELL PHONE ( ) \_\_\_\_\_ WORK PHONE ( ) \_\_\_\_\_ E-MAIL \_\_\_\_\_

## 1. How did you become aware of the identity crime?

- Found fraudulent charges on my credit card bill. Which one? \_\_\_\_\_
- Found fraudulent charges on my cellular phone bill. Which one? \_\_\_\_\_
- Received bills for an account(s) I did not open. Which one? \_\_\_\_\_
- Found irregularities on my credit report.
- Was contacted by a creditor demanding payment. Which one? \_\_\_\_\_
- Was contacted by a bank's fraud department about charges. Which one? \_\_\_\_\_
- Was denied a loan.
- Was denied credit.
- Was arrested, had a warrant issued, or a complaint filed in my name for a crime I did not commit. In what city or county? \_\_\_\_\_
- Was sued for a debt I did not incur. Which one? \_\_\_\_\_
- Was not regularly receiving bills for a legitimate account. Which one? \_\_\_\_\_
- Was denied employment.
- Had my driver's license suspended for actions I did not commit.
- Received notice of a legal action I did not file, such as a bankruptcy.
- Other: \_\_\_\_\_



2. What date did you first become aware of the identity crime? MONTH DAY YEAR (MM DD YY)

3. When did the fraudulent activity begin?

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

NAME FIRST MIDDLE LAST

ADDRESS STREET CITY STATE ZIP

Horizontal lines for name and address information.

5. Please list all fraudulent activity that you are aware of to date, with the locations and addresses of where fraudulent applications or purchases were made (retailers, banks, etc.). List in chronological order, if possible. For example:

"On 9-18-02, I received a letter from MM Collections, stating that I had accumulated \$5,000 worth of charges on American Express Account 123456789. On 9-18-02, I called American Express and spoke with Jennifer Martin. She said the account was opened on 5-12-02 by telephone. I did not open this account, even though it was in my name. The account address was 123 Main St., Anytown, NE. Ms. Martin said she would send me an Affidavit of Forgery to complete and return to her."

Please be concise and state the facts. You may attach a separate sheet of paper if you need more space.

Multiple horizontal lines for listing fraudulent activity.



6. To the best of your knowledge at this point, what identity crimes have been committed?

- Making purchase(s) using my credit cards or credit card numbers without authorization.
- Opening new credit card accounts in my name.
- Opening utility and/or telephone accounts in my name.
- Unauthorized withdrawals from my bank accounts.
- Opening new bank accounts in my name.
- Taking out unauthorized loans in my name.
- Unauthorized access to my securities or investment accounts.
- Obtaining government benefits in my name.
- Obtaining employment in my name.
- Obtaining medical services or insurance in my name.
- Evading prosecution for crimes committed by using my name or committing new crimes under my name.
- Check fraud.
- Passport/visa fraud.
- Other: \_\_\_\_\_

7. Do you have any information on a suspect in this identity crime case? If so, please provide as much information as possible about the suspect, including the suspect's full name, phone number and address. How do you believe the identity crime occurred?

**SUSPECT'S NAME** \_\_\_\_\_ **PHONE** ( ) \_\_\_\_\_  
 FIRST MIDDLE LAST

**ADDRESS** \_\_\_\_\_ **STREET** \_\_\_\_\_ **CITY** \_\_\_\_\_ **STATE** \_\_\_\_\_ **ZIP** \_\_\_\_\_

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8. Please list any government documents fraudulently obtained in your name (driver's licenses, Social Security cards, etc.)

Four horizontal lines for listing government documents.

9. 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.)

Checkboxes for Equifax, TransUnion, and Experian with date fields (MM, DD, YY).

Checkbox for 'Your bank(s). Names of bank(s):' with a line for text.

Checkbox for 'Department of Motor Vehicles.'

Checkbox for 'Social Security Administration.'

Checkbox for 'Other:' with a line for text.

10. Have you requested a credit report from each of the three credit bureaus?

(Check all that you have requested a credit report from.)

Checkboxes for Equifax, TransUnion, and Experian, followed by a grey box: 'If you have any reports, please attach a copy of each to this form.'

Please keep your original documents in a safe place. Send ONLY COPIES to the Attorney General's Office at this time.

BY FILING THIS COMPLAINT, I UNDERSTAND THAT:

The Attorney General is not my private attorney, but enforces state consumer protection laws and I will testify in court to the facts stated in this complaint.

I ATTEST TO THE ACCURACY OF STATEMENTS MADE IN THIS COMPLAINT:

YOUR SIGNATURE

DATE