IDENTITY THEFT VICTIM’S PACKET

INFORMATION AND INSTRUCTIONS

The purpose of this packet is to assist you in the investigation related to your identity theft case and should be completed in its entirety. At the time you make a police report with the University of Michigan (UM), Police Department, you will be given a Police case report number. Please keep track of your case number as creditors, financial institutions and credit report agencies will require it.

MY UM POLICE DEPARTMENT CASE REPORT NUMBER IS: _______________

This packet contains information which will assist you in the correction of your credit and will help ensure that you are not responsible for the debts incurred by the identity thief. In addition, this packet includes information that will allow you to obtain financial records related to fraudulent accounts; which you will need to provide to law enforcement. Without these financial records, the UM Police Department will not be able to conduct an investigation for prosecution. We recognize that some victims are only interested in the correction of their credit and do not necessarily wish to pursue prosecution; therefore, we request that you only submit this packet to the UM Police Department if you desire prosecution. It is important to understand that in the event a suspect is identified and arrested and the case proceeds to court, you as the victim would most likely be required to appear and testify.

Completion of dispute letters, which provide us with the necessary documentation, is required before we can begin investigating your case for prosecution. In identity theft cases it is difficult to identify the suspect(s) as they often use inaccurate information such as addresses and phone numbers. Often, the cell phones that identity thieves use are non-traceable prepaid phones or are opened with fraudulent information. Frequently, the investigator is unable to find evidence to prove who actually used the victim’s name and/or personal information over the phone or internet.

It is important to note that even if a suspect cannot be identified for prosecution, it will not affect your ability to correct fraudulent accounts and remove them from your credit. Furthermore, when you report your identity theft to the UM Police Department, all of the relevant information from your case will be entered into our database which will allow us to cross-reference your report with potential suspects who are involved in or have been arrested on other cases.

PLEASE NOTE:

- **IF YOU SUSPECT SOMEONE IS USING YOUR PERSONAL INFORMATION FOR EMPLOYMENT AND THERE IS NO EVIDENCE OF OTHER IDENTITY FRAUD, PLEASE SEE THE SECTION ON CONTACTING THE SOCIAL SECURITY ADMINISTRATION UNDER ADDITIONAL USEFUL INFORMATION. DO NOT CONTACT THE EMPLOYER DIRECTLY AS THEY MAY WARN THE SUSPECT EMPLOYEE.**

  *IT MAY NOT BE NECESSARY TO COMPLETE THIS PACKET.*

- **IF YOUR NAME AND/OR INFORMATION IS USED BY SOMEONE ELSE IN ORDER TO AVOID A TRAFFIC TICKET OR ANY CRIMINAL PROSECUTION, PLEASE CONTACT THE AGENCY INVESTIGATING THE ORIGINAL CRIME.**

  *IT MAY NOT BE NECESSARY TO COMPLETE THIS PACKET.*
HELPFUL HINTS:

- Remember that each creditor has different policies and procedures for correcting fraudulent accounts.
- Do not provide originals and be sure to keep copies of everything you provide to the creditors or companies involved in the identity theft.
- Write down all dates, times, phone numbers and the names of individuals you speak to regarding the identity theft and correction of your credit.

STEP 1: CONTACT YOUR BANK AND OTHER CREDIT CARD ISSUERS

If the identity theft involved existing bank accounts, checking or savings accounts as well as credit or debt cards, you should do the following:

- Close the account(s) that was used fraudulently or have stop payments issued on all outstanding checks that might have been written without your knowledge.
- Close all credit card accounts that were used fraudulently.
- Close any account(s) accessible by debit card if it has been accessed fraudulently.
- Open new account(s) protected with a secret password or personal identification number (PIN).

If the identity theft involved the creation of new bank accounts you should call the involved financial institution(s) and notify them of the identity theft. The involved financial institution(s) will likely require additional notification. (See Step 4)

STEP 2: CONTACT ALL THREE (3) MAJOR CREDIT REPORTING BUREAUS

Request the credit bureaus place a “Fraud Alert” on your file. A Fraud Alert will place a notice on your credit report indicating that you have been the victim of identity theft. Merchants and financial institutions may opt to contact you directly before any new credit is taken out in your name. Some states allow for a SECURITY FREEZE in which a PIN can be designated on your credit file. Subsequently, the PIN must be given in order for credit to be extended. You should ask the credit reporting bureaus if your state participates in the Security Freeze Program.

- www.scamsafe.com  Provides useful information related to identity theft and indicates which states participate in the Security Freeze Program.
- www.annualcreditreport.com  Provides one free credit report, per credit bureau agency, per year with subsequent credit reports available at a nominal fee.

The following is a list of the three (3) major credit reporting bureaus for victims to report fraud:

- Equifax
  Consumer Fraud Division 800-525-6285
  P.O. Box 740241 Atlanta, GA 30374
  www.equifax.com

- TransUnion
  Fraud Victim Assistance Dept. 800-680-7289
  P.O. Box 6790 Fullerton, CA 92834
  www.transunion.com

- Experian
  Nat. Consumer Assist 888-397-3742
  P.O. Box 9532 Allen, TX 75013
  www.experian.com
STEP 3: FILE A REPORT WITH THE FEDERAL TRADE COMMISSION

You MUST go on-line to file an identity theft complaint with the Federal Trade Commission at www.ftc.gov/bcp/edu/microsites/idtheft or by calling 1-877-IDTHEFT (438-4338).

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STEP 4: CONTACT CREDITORS INVOLVED IN THE IDENTITY THEFT BY PHONE AND IN WRITING

This step involves contacting all the companies or institutions that provided credit or opened new accounts for the suspect or suspects. Some examples include: Banks, mortgage companies, utility companies, telephone companies, cell phone companies, etc. You should provide the creditors with a completed Identity Theft Affidavit (some creditors may require that you use their own affidavit), a Letter of Dispute, and a copy of the FACTA Law.

FTC Identity Theft Affidavit:
A copy of the FTC Identity Theft Affidavit can be found at the end of this packet. The affidavit requests information regarding you as the victim, how the fraud occurred, law enforcement’s actions, a documentation checklist, and a Fraudulent Account Statement. Please note: Some creditors, financial institutions, or collection agencies have their own affidavit that you may have to complete.

Letters of Dispute:
Sample copies of the Letter of Dispute can also be found at the end of this packet. This letter needs to be completed for every creditor involved in the identity theft. The Letter of Dispute should contain information related to the fraudulent account(s), your dispute of the account(s), and your request for the information to be corrected. In addition, the letter should reference FACTA and include a request for copies of any and all records related to the fraudulent account(s) be provided to you and also made available to the UM Police Department.

FACTA Law:
A portion of the FACTA Law can also be found at the end of this packet. As previously discussed, FACTA allows for you to obtain copies of any and all records related to the fraudulent account(s). You are then permitted to provide law enforcement with copies of the records you received related to the account(s); thereby allowing us to bypass the sometimes difficult process of obtaining subpoenas for the very same information. The law also allows you to request the information be made available directly to the UM Police Department. We have found it useful to provide a copy of the FACTA Law with the submission of the Identity Theft Affidavit and the Letter of Dispute to the individual creditors.

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STEP 5: SUBMIT THE IDENTITY THEFT AFFIDAVIT AND COPIES OF ALL INFORMATION AND RECORDS OBTAINED FROM THE CREDITORS WITH REGARD TO THE FRAUDULENT ACCOUNTS TO:

University of Michigan Police Department
c/o – Detective Bureau
1239 Kipke Drive
Ann Arbor, MI 48109-2036
To avoid confusion and to ensure that all items are forwarded to the assigned detective, we request that you submit everything at once. If at all possible, do not send items separately. Be sure to reference your police case report number on all items submitted. The information can be hand delivered, mailed, or scanned and attached to an email. Please remember that some victims are only interested in the correction of their credit and do not necessarily wish for prosecution. Therefore, we request that you only submit this packet to the UM Police Department if you desire prosecution and would be willing and available to appear and testify should a suspect be identified and arrested.

OTHER ENTITIES YOU MAY WANT TO REPORT YOUR IDENTITY THEFT TO:

POST OFFICE:
If you suspect that your mail has been stolen or diverted with a false change-of-address request, contact your local postal inspector. You can obtain the address and telephone number of the postal inspector for your area at www.usps.com/ncsc/locators/find-is.html (enter your zip code).

SOCIAL SECURITY ADMINISTRATION:
If you suspect that someone is using your social security number to obtain employment, contact the Social Security Administration’s fraud hotline at 1-800-269-0271. Order a copy of your Personal Earnings and Benefit Estimate Statement (PEBES) in order to check the accuracy of your work history on file with the Social Security Administration. You can obtain a PEBES application at your local Social Security office or at www.ssa.gov/online (Search for Form - SSA 7004).

STATE DEPARTMENT:
If your passport has been stolen, notify the passport office in writing. You can obtain additional information from the State Department’s website at www.travel.state.gov (click on Passports tab).

IF YOU ARE CONTACTED BY A COLLECTION AGENCY regarding a debt for which you are not responsible, immediately notify them that you did not create the debt and that you are a victim of identity theft. Follow up with the collection agency and creditor in writing and include a copy of your police report, ID Theft Affidavit, Letter of Dispute, and a copy of the FACTA Law.

ATTACHED DOCUMENTS:
- Federal Trade Commission Identity Theft Affidavit (4 pages)
- Sample – Letters of Dispute (2)
- Fair and Accurate Credit Transactions Law (2 pages)
IDENTITY THEFT AFFIDAVIT

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 ___________________________________ (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 ________________________________________________________________

7. City __________________ State __________ Zip Code __________
   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 this address (No. 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 (i.e., 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 (i.e., my name, address, date of birth, existing account numbers, Social Security number, mother’s maiden name, etc.) or identification documents to obtain money, credit, loans, or goods and/or services without my knowledge or authorization:

<table>
<thead>
<tr>
<th>Name (if known)</th>
<th>Name (if known)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Address (if known)</td>
<td>Address (if known)</td>
</tr>
<tr>
<td>Phone number(s) (if known)</td>
<td>Phone number(s) (if known)</td>
</tr>
<tr>
<td>Any additional information (if known)</td>
<td>Any additional information (if known)</td>
</tr>
</tbody>
</table>

15. □ I do NOT know who used my information or identification documents to obtain money, credit, loans, or goods and/or services without my knowledge or authorization.

16. □ Additional comments (i.e., description of the fraud, which documents or information were used, how the identity thief gained access to your information, etc.):

______________________________________________________________________
______________________________________________________________________
______________________________________________________________________
______________________________________________________________________

(Attach additional pages as necessary)

**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 agencies. The police □ did □ did not write a report.

In the event you have contacted the police or other law enforcement agencies, please complete the following:

<table>
<thead>
<tr>
<th>Agency 1</th>
<th>Officer/Agency personnel taking report</th>
</tr>
</thead>
<tbody>
<tr>
<td>Date of Report</td>
<td>Report number, if any</td>
</tr>
<tr>
<td>Phone number</td>
<td>Email address, if any</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Agency 2</th>
<th>Officer/Agency personnel taking report</th>
</tr>
</thead>
<tbody>
<tr>
<td>Date of Report</td>
<td>Report number, if any</td>
</tr>
<tr>
<td>Phone number</td>
<td>Email address, if any</td>
</tr>
</tbody>
</table>
Please indicate the supporting documentation(s) 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, (i.e., driver’s license, state issued ID Card, passport, etc.). 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 your official school record showing your enrollment and place of residence.

21. □ Proof of residency during the time the disputed bill occurred, the loan was made or any other event took place, (i.e., 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 department. If you are unable to obtain a report or a report number from the police, please indicate in Item 19. Some companies only need the report number, not a copy of the report; you may want to check with each company.

I certify that to the best of my knowledge and belief, all of the information on and attached to this affidavit is true, correct, 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 the imposition of a fine, or imprisonment, or both.

_______________________________________________________             __________________
Signature               Date signed

________________________________________________________________
Notary

Check with each company. Creditors may require notarization. If they do not, please have one witness, non-relative, sign below verifying that you completed and signed this affidavit.

Witness:

_______________________________________________________             __________________
Signature               Printed name

________________________________________________________________
Date                Telephone number
**FRAUDULENT ACCOUNT 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 example below.**

- If a collection agency sent you a statement, letter or notice regarding the fraudulent account, attach a copy of that document (NOT the original).

**I declare (check what applies):**

- [ ] 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:

<table>
<thead>
<tr>
<th>Creditor Name/Address</th>
<th>Account Number</th>
<th>Type of authorized credit/goods/services provided by creditor (if known)</th>
<th>Date issued or opened (if known)</th>
<th>Amount/Value provided (amount charged or the cost of the goods/service)</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Example:</strong> National Bank of State 22 Main Street Columbus, Ohio 22722</td>
<td>01234567-89</td>
<td>Auto Loan</td>
<td>01/05/2007</td>
<td>$25,500.00</td>
</tr>
</tbody>
</table>

- [ ] on my open active account(s) someone, without my knowledge or permission, made changes to my account.

**Billing Name:** ________________________________________________________________

**Billing Address:** ________________________________________________________________

**Account Number:** ________________________________________________________________

#
SAMPLE DISPUTE LETTER

Date

Name of Company
Address
City, State, Zip Code

Re: Your name
Your Address, City, State, Zip Code
Complaint Department

Dear Sir or Madam:

I am writing to dispute the following information in my file. I have circled the items in dispute on the attached copy of the report I received.

This item(s) (identify items disputed by name of source: creditors or tax court. Also identify type of item: credit account, judgment, etc) is inaccurate or incomplete because (describe what is inaccurate or incomplete and why). I am requesting that the item be removed (or request another specific change) to correct the information.

Enclosed are copies of (use this sentence if applicable and describe any enclosed documentation, such as a police report, ID Theft Affidavit, payment records or court documents) supporting my position. Please reinvestigate this or these matter(s) and delete or correct the disputed item(s) as soon as possible.

Pursuant to FACTA, as a victim of identity theft I am also requesting that you provide me with copies of any and all applications and business transaction records related to the fraudulent account(s). The copies of the records can be mailed to me at the address listed above. In addition, please make these records available to the UM Police Department, Ann Arbor, Michigan 48109-2036, upon their request.

Sincerely,

Your name

Enclosed: (List everything you are enclosing)
SAMPLE DISPUTE LETTER FOR EXISTING ACCOUNTS

Date

Name of Company
Address
City, State, Zip Code

Re: Your name
Your Address, City, State, Zip Code
Complaint Department

Dear Sir or Madam:

I am writing to dispute a fraudulent charge or debit on my account in the amount of $_______. I am a victim of identity theft and I did not generate this charge or debit. I am requesting that the charge is removed or debit be reinstated and that any finance or other charges related to the fraudulent amount be credited. I also request that I receive an accurate statement.

Enclosed are copies of (use this sentence to describe any enclosed information: police report, Identity Theft Affidavit, etc.) supporting my position. Please investigate this matter and correct the fraudulent charge or debit as soon as possible.

Pursuant to FACTA, as a victim of identity theft I am also requesting that you provide me with copies of any and all applications and business transaction records related to the fraudulent account(s). The copies of the records can be mailed to me at the address listed above. In addition, please make these records available to the University of Michigan Police Department, Ann Arbor, Michigan 48109-2036, upon their request.

Sincerely,

Your name

Enclosed: (List everything you are enclosing)
Sec. 151. Summary of Rights of Identity Theft Victims

(a) In General
   (1) Summary – Section 609 of the Fair Credit Reporting Act (15 U.S.C. 1681g) is amended by adding at the end the following:

(d) Summary of Rights of Identity Theft Victims
   (1) In General – The Commission, in consultation with the Federal banking agencies and the National Credit Union Administration, shall prepare a model summary of the rights of consumers under this title with respect to the procedures for remedying the effects of fraud or identity theft involving credit, an electronic fund transfer, or an account or transaction at or with a financial institution or other creditor.
   (2) Summary of Rights and Contact Information
      Beginning 60 days after the date on which the model summary of rights is prescribed in final form by the Commission pursuant to paragraph (1), if any consumer contacts a consumer reporting agency and expresses a belief that the consumer is a victim of fraud or identity theft involving credit, an electronic fund transfer, or an account or transaction at or with a financial institution or other creditor, the consumer reporting agency shall, in addition to any other action that the agency may take, provide the consumer with a summary of rights that contains all of the information required by the Commission under paragraph (1), and information on how to contact the commission to obtain more detailed information.

(e) Information Available to Victims
   (1) In General – For the purpose of documenting fraudulent transactions resulting from identity theft, not later than 30 days after the date of receipt of a request from a victim in accordance with paragraph (3), and subject to verification of the identity of the victim and the claim of identity theft in accordance with paragraph (2), a business entity that has provided credit to, provided for consideration products, goods, or services to, accepted payment from, or otherwise entered into a commercial transaction for consideration with, a person who has allegedly made unauthorized use of the means of identification of the victim, shall provide a copy of application and business transaction records in the control of the business entity, whether maintained by the business entity or by another person on behalf of the business entity, evidencing any transaction alleged to be a result of identity theft to:
      (A) the victim;
      (B) any Federal, State, or local government law enforcement agency or officer specified by the victim in such a request; or
      (C) any law enforcement agency investigating the identity theft and authorized by the victim to take receipt of records provided under this subsection.
   (2) Verification of Identity and Claim – Before a business entity provides any information under paragraph (1), unless the business entity, at its discretion, otherwise has a high degree of confidence that it knows the identity of the victim making a request under paragraph (1), the victim shall provide to the business entity:
      (A) as proof of positive identification of the victim, at the election of the business entity:
         (i) the presentation of a government issued identification card;
         (ii) personally identifying information of the same type as was provided to the business entity by the unauthorized person; or
         (iii) personally identifying information that the business entity typically requests from new applicants or for new transactions, at the time of the victim’s request for information, including any documentation described in clauses (i) and (ii); and
(B) as proof of a claim of identity theft, at the election of the business entity:
   (i) a copy of a police report evidencing the claim of the victim of identity theft; (ii) and a properly completed:
   (I) copy of a standardized affidavit of identity theft developed and made available by the Commission; or
   (II) an affidavit of fact that is acceptable to the business entity for that purpose.

(3) PROCEDURES – The request of a victim under paragraph (1) shall:
   (A) be in writing;
   (B) be mailed to an address specified by the business entity, if any; and
   (C) if asked by the business entity, include relevant information about any transaction alleged to be a result of identity theft to facilitate compliance with this section including:
      (i) if known by the victim (or if readily obtainable by the victim), the date of the application or transaction; and
      (ii) if known by the victim (or if readily obtainable by the victim), any other identifying information such as an account or transaction number.

(4) NO CHARGE TO VICTIM – Information required to be provided under paragraph (1) shall be so provided without charge.

(5) AUTHORITY TO DECLINE TO PROVIDE INFORMATION – A business entity may decline to provide information under paragraph (1) if, in the exercise of good faith, the business entity determines that:
   (A) this subsection does not require disclosure of the information;
   (B) after reviewing the information provided pursuant to paragraph (2), the business entity does not have a high degree of confidence in knowing the true identity of the individual requesting the information;
   (C) the request for the information is based on a misrepresentation of fact by the individual requesting the information relevant to the request for information; or
   (D) the information requested is Internet navigational data or similar information about a person’s visit to a website or online service.