

# Instructions for Completing the Identity Theft Affidavit

Tomake certain that you do not become responsible for any debts incurred by an identity thief, you must prove to Beccas Home LLC ("Becca's") that you didn't create the debt by fully completing this Identity Theft Affidavit.

It will be necessary to provide the information in this affidavit anywhere a new account was opened in your name or an existing account was affected by identity theft. The information will enable Becca's to investigate the fraud and decide the outcome of your claim.

This affidavit has two parts:

- Part One the Identity Theft Affidavit

   is where you report general
   information about yourself and the
   theft.
- Part Two the Fraudulent Account
   Statement is where you describe the
   fraudulent account(s) opened in your
   name.

When you send the affidavit to Beccas Home LLC, attach copies (NOT originals) of any supporting documents (for example, driver's license or police report). 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. Delays on your part could slow the investigation.

Be as accurate and complete as possible. You may choose not to provide some of the information requested. However, incorrect or incomplete information will slow the process of investigating your claim and absolving the debt. Print clearly.

When you have finished completing the affidavit, mail a notarized copy to Beccas Home LLC at:

#### P.O. Box 201 Lawrence, NY 11559

Or email a scanned and notarized copy to: fraudclaims@BeccasHome.com

Attach a copy of the Fraudulent Account Statement and any other supporting documentation you are able to provide.

Beccas Home LLC will review your claim and send you a written response telling you the outcome of their investigation. Keep a copy of everything you submit.

If you are unable to 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 Becca's to process your affidavit, investigate the events you report, and help stop further fraud.

Completing this affidavit does not guarantee that the identity thief will be prosecuted or that the debt will be cleared.



If you haven't already done so, report the fraud to the following organizations:

- I. Any one of the nationwide consumer reporting companies to place a fraud alert on your credit report. Fraud alerts can help prevent an identity thief from opening any more accounts in your name. The company you call is required to contact the other two, which will place an alert on their versions of your report, too.
  - Equifax: 1-800-525-6285; www.equifax.com
  - Experian: I-888-EXPERIAN (397-3742); www.experian.com
  - TransUnion: 1-800-680-7289;
     www.transunion.com

In addition to placing the fraud alert, the three consumer reporting companies will send you free copies of your credit reports, 4. The Federal Trade Commission. By sharing and, if you ask, they will display only the last your identity theft complaint with the FTC, you will provide important information that can help law enforcement officials across

2. The security or fraud department of each company where you know, or believe, accounts have been tampered with or opened fraudulently. Close the accounts. Follow up in writing and include copies (NOT originals) of supporting documents. It's important to notify credit card companies and banks in writing. Send your letters by certified mail, return receipt requested, so you can document what the company received and when. Keep a file of your correspondence and enclosures.

When you open new accounts, use new Personal Identification Numbers (PINs) and

- passwords. Avoid using easily available information like your mother's maiden name, your birth date, the last four digits of your Social Security number or your phone number, or a series of consecutive numbers.
- 3. Your local police or the police in the community where the identity theft took place to file a report. Get a copy of the police report or, at the very least, the number of the report. It can help you deal with creditors who need proof of the crime. If the police are reluctant to take your report, ask to file a "Miscellaneous Incidents" report, or try another jurisdiction, like your state police. You also can check with your state Attorney General's office to find out if state law requires the police to take reports for identity theft. Check the Blue Pages of your telephone directory for the phone number or check www.naag.org for a list of state Attorneys General.
- 4. The Federal Trade Commission. By sharing your identity theft complaint with the FTC, you will provide important information that can help law enforcement officials across the nation track down identity thieves and stop them. The FTC also can refer victims' complaints to other government agencies and companies for further action, as well as investigate companies for violations of laws that the FTC enforces.

You can file a complaint online at www.consumer.gov/idtheft. If you don't have Internet access, call the FTC's Identity Theft Hotline, toll-free: I-877-IDTHEFT (438-4338); TTY: I-866-653-4261; or write: Identity Theft Clearinghouse, Federal Trade Commission, 600 Pennsylvania Avenue, NW, Washington, DC 20580.



## **Identity Theft Affidavit**

# Victim Information (I) My full legal name is \_\_\_\_\_ (First) (Middle) (Jr., Sr., III) (Last) (If different from above) When the events described in this affidavit took place, I was known as (First) (Middle) (Jr., Sr., III) (Last) (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) (If different from above) When the events described in this affidavit took place, my address was City\_\_\_\_\_Zip Code \_\_\_\_\_ (9) I lived at the address (in Item 8) from\_\_\_\_until \_\_\_\_ (month/year) (month/year) (10) My daytime telephone number is (\_\_\_\_\_)\_\_\_\_\_ My evening telephone number is (\_\_\_\_)\_\_\_\_ (Optional) My email address is \_\_\_\_\_



## How the Fraud Occurred

Check all that apply for items 11 - 15:			
(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)  My credit report contains the following incorrect information as a result of this identity theft:			
(13)  did not receive any benefit, goods or service	es as a result of the fraud that occurred.		
(14)  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)		
(15) To the best of my knowledge and belief, the feet example, my name, address, date of birth, enumber, mother's maiden name, etc.) or ide loans, goods or services without my knowle	xisting account numbers, Social Security ntification documents to get money, credit,		
Name (if known)	Name (if known)		
Address (if known)	Address (if known)		
Phone number(s) (if known)	Phone number(s) (if known)		
(16) I do NOT know who used my information or identification documents to get money, credit, loans, goods or services without my knowledge or authorization.			
(17) Please provide a detailed statement describing to documentation that is being requested: (For which documents or information were used to your information.)	example, description of the fraud,		

# Becca's Home

(Attach additional pages as necessary.)



## Victim's Law Enforcement Actions (18) (check one) I $\square$ am $\square$ am not willing to assist in the prosecution of the person(s) who committed this fraud. (19) (check one) I $\square$ am $\square$ 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. (20) (check all that apply) I $\Box$ have $\Box$ have not reported the events described in this affidavit to the police or other law enforcement agency. The police $\Box$ did $\Box$ did not write a report. In the event you have contacted the police or other law enforcement agency, please complete the following: (Officer/Agency personnel taking report) (Agency #1) (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 are able to provide. Attach copies (NOT originals) to the affidavit. (21) 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 don't have a photo-ID, you may submit a copy of your birth certificate or a copy of your official school

records showing your enrollment and place of residence.

utility bill or a copy of an insurance bill).

(22) 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



(23)	A copy of the report y	ou filed with the polic	e or sheriff's depa	rtment. If you are ι	ınable to
	obtain a report or re	port number from the	police, please inc	licate that in Item	19.

#### Signature

I certify that, to the best of my knowledge and belief, all the information on and attached to this affidavit is true, correct, complete, and made in good faith. I also understand that is 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 imposition of a fine or imprisonment or both. By signing this affidavit, I agree to authorize Beccas Home LLC to release information pertaining to this investigation.

signature)	(date signed)
Signature)	(date signed)

Reminder: Be sure to enclose a copy of at least one of the following identifications:

- Current US Driver's License with photo
- Current State Issued Identification card with photo
- Current Passport
- Current Military Identification card

Mail this Information

OR

Email a scanned copy of this Information to:

to:

fraudclaims@BeccasHome.com

P.O. Box 201 Lawrence, NY 11559



## **Fraudulent Account Statement**

#### **Completing this Statement:**

- List only the account(s) you're disputing with Becca's.
- 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 that as a result of the event(s) described in this Identity Theft Affidavit, the following account(s) was/were opened at Becca's in my name without my knowledge, permission or authorization using my personal information or identifying documents:

	Account Number	Type of unauthorized credit/goods/services provided by Becca's (if known)	Date issued or opened	Amount/Value provided (the amount charged or the goods/services)
v	Vas the accoun	nt onened fraudulently?		(Yes or No)

Was the account opened fraudulently?	(Yes or No	n)
Was the account an existing account that :	someone tampered with?	(Yes or No)