



FINANCIAL FRAUD

Instructions and Useful Information

The St. Helens Police Department provides this packet of information to assist victims of Identity Theft, Credit or Debit Card Fraud, Forgery and other types of Account Fraud. In most instances these cases are typically handled in one of two ways;

- 1) **Identity Theft** cases usually involve an unknown suspect conducting this activity in an unknown location. Many times this occurs overseas. These cases are difficult if not impossible for the St. Helens Police Department to investigate. We recognize that some victims are only interested in the correction of their credit report or need a police report number to provide their bank. Copies of this completed report, along with a St. Helens Police Department case number will suffice as a police report.
- 2) **Credit or Debit Card Fraud, Forgery and other types of Account Fraud** are often perpetrated by a known suspect and can be investigated. A complete fraud packet, submitted to a police officer will initiate an investigation. These investigations may be complex, could take several weeks to complete and could result in your court appearance.

If you are a victim but unsure about the kind of crime that may have been committed, we encourage you to ask a police officer for assistance. Officers can be reached at any time by calling our non-emergency dispatch number 503-397-1521. Please know that the success of a criminal investigation and prosecution can be determined by the level of detail that you are able to provide. Incomplete information, a lack of supporting documentation or an uncooperative victim could result in delays or no investigation at all.

The first seven pages of this packet contain information to assist you in the correction of your credit and to help decrease the possibility of you being held responsible for debts incurred by the identity thief. This packet also includes information to help you obtain financial records related to fraudulent accounts and provide those records to our officers. The packet provides information on your rights as a victim and may be useful even if you do not wish to assist in prosecution and are only trying to correct your credit or obtain a refund from your bank.

Please REMOVE pages 1-7 before submitting the fraud packet.

Pages 7-14 are part of the police report and require your completion. Please fill it out to the best of your ability. Promptly return the remainder of the packet with supporting documentation to the St. Helens Police Department.

BANK ACCOUNT FRAUD INFORMATION

CONTACT YOUR BANK - If you are a victim of **Bank Account Fraud** (meaning your savings or checking account number (*not debit card number*) has been compromised, such as checks stolen, account number used to print checks with someone else's information as the account holder, or unauthorized withdrawals not including debit card transactions) on an existing checking or savings account, you should do the following:

- Close the account that was used fraudulently immediately. If your account number has been compromised, the only way to prevent additional fraud is to close the account.
- Review your account and dispute any unauthorized transactions immediately.
- Obtain copies of the front and back of any fraudulent checks negotiated against your account as well as a copy of your bank statement showing the fraudulent transactions.

NOTE: *If the fraud activity involved the theft of your identity for the creation of new bank or credit accounts, you should contact the financial institution and notify them of the identity theft and follow the instructions for identity theft victims.*

DEBIT/CREDIT ACCOUNT FRAUD INFORMATION

CONTACT YOUR BANK- If your **Debit/Credit Card or Card Number** has been lost/stolen or compromised, you should do the following:

- Notify the financial institution to close the card immediately. (*It is often not necessary to close your entire account if only your debit card number has been compromised, since the card does not contain your account number.*)
- Ask your financial institution to issue a new debit/credit card number and a new PIN number (*a new PIN is recommended in the event your prior number was compromised as well as the card number*).
- Review your account and dispute any unauthorized transactions. Provide full card number which fraud occurred on as well as statement copies with all fraudulent transactions notated (*please do not highlight since this does not show up easily when copied.*) Fraudulent transaction information **MUST** include transaction dates (*may differ from posting dates*), time, location, and amounts. ***This may require you to contact your financial institution to obtain the requested information such as the transaction time which is often not listed on your statement.***

IDENTITY THEFT VICTIM INFORMATION

You are a victim of identity theft if your personal identifying information has been used in a fraudulent manner (*ex. opening fraudulent accounts, obtaining employment*) without your permission. In identity theft cases it is often difficult to identify the suspect(s) as they use inaccurate information such as names, addresses, and phone numbers. Frequently the investigator cannot 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 the suspect cannot be identified for prosecution, it will not affect your ability to correct the fraudulent accounts and remove them from your credit.****** When you report your identity crime to the St Helens Police Department, all of the relevant information from your case is entered into our database, which will allow us to cross-reference your report with potential suspects who are involved in or arrested in other cases. Follow the steps below if you have been a victim of identity theft.

STEP 1- CONTACT THE 3 MAJOR CREDIT BUREAUS AND FEDERAL TRADE COMMISSION-

Request a copy of your credit report to identify any fraudulent accounts. Request the credit bureaus place a "Fraud Alert" on your file indicating you have been the victim of identity theft. Merchants and financial institutions **MAY** opt to contact you directly before any new credit is established in your name. ***Some states allow for a "Security Freeze" in which a PIN can be designated on your credit file and subsequently the PIN must then be given in order for credit to be extended. Ask the credit reporting bureau if your state is participating in the Security Freeze Program.***

Equifax	TransUnion	Experian
Consumer Fraud Division	Fraud Victim Assistance Department	National Consumer Assist
800-685-1111	800-916-8800	888-397-3742
PO Box 241	PO Box 1000	PO Box 2104
Atlanta, GA 30374-0241	Chester, PA 19022	Allen, TX 75013-0949
www.equifax.com	www.transunion.com	www.experian.com

www.ftc.gov – file an identity theft complaint and locate additional useful information regarding identity theft such as sample dispute letters and fraud affidavits. You may also call 1-877-IDTHEFT.

www.annualcreditreport.com – provides one free credit report, per credit bureau agency, per year, with subsequent credit report available at a nominal fee.

www.scamsafe.com – provides useful information related to identity theft and indicates which states participate in the Security Freeze program.

STEP 2- CONTACT CREDITORS INVOLVED IN THE IDENTITY THEFT BY PHONE

AND IN WRITING- This step involves contacting all companies or institutions that provided credit or accounts to someone using your personal identifying information fraudulently. Some examples include banks, utility companies, cell phone companies, etc. The FACTA (see definition below) act allows identity theft victim's to obtain copies of all records related to fraudulent accounts. You are then permitted to provide law enforcement copies of the records you received related to the fraudulent accounts; thereby allowing us to bypass the sometimes difficult process of obtaining subpoenas for the same information. It also allows you to request the information be made available to the St Helens Police Department. Provide creditors with a letter of dispute, an Identity Theft affidavit (some may require their own affidavit to be completed). If the creditor does not have an affidavit, one can be found online at <http://www.ftc.gov> along with examples of letters of dispute. Your letter of dispute should request copies of any and all records related to the fraudulent accounts be provided to you and made available to the St. Helens Police Department. **A request letter has been included for your use on page 7.**

If new accounts have been opened in your name, please obtain and provide the following:

Credit reports showing accounts that are not yours (*please do not highlight since this does not show up easily when copied*).

- A. Bills from utility accounts you did not open
- B. Letters or documentation from creditors that contain:
- C. Copies of applications for credit
- D. How the account was opened (in person, over the phone, on the internet)
- E. Where the account is being used (address of service, where any cards, bills, merchandise, or correspondence was mailed)
- F. Any phone numbers associated with the fraudulent account
- G. The name or employee number and phone number of any representatives you spoke with about the fraudulent accounts.

NOTE:

If your personal information was used by someone else to avoid a traffic ticket or any criminal prosecution, please contact the law enforcement agency investigating the original crime.

FACTA (Fair and Accurate Credit Transactions Act of 2003) INFORMATION

The Fair and Accurate Credit Transactions Act (15 U.S.C. 1681g), also known as FACTA is an amendment to the Fair Credit Reporting Act, which was signed on December 4, 2003. The purpose of the amendment was to prevent identity theft and improve resolution of consumer disputes. Congress sought to provide victims with easy access to reliable information regarding the steps they should take to deal with identity theft. FACTA requires business entities that provide credit to comply with certain rules and procedures with respect to reported cases of identity theft. The business entity must supply a copy of the business records that led to the fraudulent transaction(s) within 30 days after receipt of a request from a victim at no charge to the victim. The victim and any authorized federal, state, or local law enforcement agency investigating the identity theft may receive the records.

In order to receive a copy of the business records, the victim must provide the following to the business entity:

1. Proof of Identification (unless the business entity has a “high degree of confidence” in the identity of the victim):
 - a. Government-issued identification card;
 - b. Personal identifying information similar to what was provided to the business entity by the unauthorized person; and
 - c. Information the business entity typically requires from new applicants.
2. Proof of a Claim of Identity Theft;
 - a. A copy of a police report evidencing the claim;
 - b. A copy of a standardized affidavit of identity theft developed and made available by the FTC; or
 - c. An affidavit of fact acceptable by the entity for that purpose.

The request of the victim shall be in writing, mailed to the address specified by the entity, and include all information related to transactions that resulted in identity theft, if known by the victim including date or account or transaction number.

The business entity may decline to provide the information if it determines in good faith that:

- a. It does not have a high degree of confidence in knowing the true identity of the individual requesting the information;
- b. The disclosure of information is not required;
- c. The request for the information is based on a misrepresentation of fact by the individual requesting the information; or
- d. The information is “internet navigational data” about a visit to a website.

For full description of FACTA please visit the following website:

<https://www.gpo.gov/fdsys/pkg/PLAW-108publ159/pdf/PLAW-108publ159.pdf>

PERSONAL INFORMATION USED SOLELY FOR EMPLOYMENT:

- If you suspect someone is using your personal information for employment and there is no evidence of other identity fraud, please see the section for contacting the Social Security Administration under Additional Useful Information. **DO NOT** contact the employer as they may warn the suspect employee.
- IRS has jurisdiction over tax related matters and it may be unnecessary for you to complete this packet.

HELPFUL HINTS:

- *Do not provide originals and keep copies of all documents related to the fraudulent matter reported.*
- *Keep a record or ledger of all activity related to the fraudulent matter (ex. Dates, phone numbers, contact person at the businesses, etc...).*

ADDITIONAL USEFUL INFORMATION-

Other entities you may want to report your identity theft to:

- **POST OFFICE-** *If you suspect 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 by visiting <http://www.usps.com/ncsc/locators/findis.html> or calling 800-275-8777.*
 - **SOCIAL SECURITY ADMINISTRATION-** *If you suspect someone is using your social security number to obtain employment, contact the Social Security Administration's fraud hotline at 800-269-0271. Order a copy of your Personal Earnings and Benefits Estimate (PEBES) 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 <http://www.ssa.gov/online/ssa-7004.pdf>.*
 - **INTERNAL REVENUE SERVICE-** *the IRS Office of Special Investigations can be contacted at www.irs.gov to report false tax filings, potential criminal violations or the Internal Revenue Code and related financial crimes.*
 - **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 <http://travel.state.gov/> or by calling 877-487-2778.*
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- ***If you are contacted by a collection agency-*** *about a debt for which you are not responsible, immediately notify them 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 and a letter of dispute.*
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STEP 3- SUBMIT THE FRAUD PACKET AND COPIES OF ALL INFORMATION AND RECORDS RELATED TO THE FRAUD ACTIVITY TO;

***ST HELENS POLICE DEPARTMENT
150 SOUTH 13TH STREET
ST HELENS, OREGON 97051***

IF THE PACKET IS NOT ENTIRELY COMPLETED OR DOES NOT CONTAIN COPIES OF THE REQUIRED DOCUMENTATION, THIS INVESTIGATION MAY BE DELAYED OR COULD BE DENIED ENTIRELY.



**PLEASE RETAIN THE FIRST 8 PAGES OF THIS PACKET FOR YOUR RECORDS.
ONLY RETURN PAGES 9-15 TO THE POLICE DEPARTMENT.**

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Made pursuant to § 609(e) of the Fair Credit Reporting Act (15 U.S.C. § 1681g), Civil Code § 1748.95 and Penal Code § 530.8.

ACCOUNT #: _____ **CLAIM #:** _____

I am a victim of identity theft. I am formally disputing a transaction or an account I have learned has been made, opened or applied for with you. I did not make this transaction or open or apply for this account and have not authorized anyone else to do so for me. You may consider this transaction or account to be fraudulent. Below is my identifying information. I have filed a report of identity theft with my local police department and a copy is attached. Under federal laws, creditors and other business entities must provide a copy of application and business transaction records relating to fraudulent transactions or accounts opened or applied for using an identity theft victim's identity. As a victim, I authorize your release of the account information to the **St Helens Police Department**.

I am designating the agency listed below as an additional recipient of all account information and documents. I authorize the release of all account documents and information to the law enforcement agency designated below. I am requesting you provide copies of the following records related to the disputed transaction or account:

- Application records or screen prints of Internet/phone applications
- Statements
- Payment/charge slips
- Investigator's Summary
- Delivery addresses
- Any other documents associated with the account
- All records of phone numbers used to activate and/or access the account

Name: _____ **Social Security Number:** _____

Address: _____

Phone: _____ **Email Address:** _____

Employer: _____ **Phone:** _____

Designated Police Department: St Helens Police Dept **Report #:** _____

Address: 150 South 13th Street, St. Helens OR 97051 **Fax #:** 503-397-0619

Designated Investigator: _____

Signed: _____ **Date:** _____

ST HELENS POLICE DEPARTMENT CASE NUMBER _____

PLEASE COMPLETE ALL SECTIONS COMPLETELY. RETURN COMPLETED PAGES PROMPTLY ALONG WITH SUPPORTING DOCUMENTATION AFTER MAKING A COPY FOR YOUR RECORDS: (If additional space is needed for any section, please attach additional pages.)

Name (first, middle, last) _____

Social Security Number _____

Date of Birth _____ Driver License # _____

Email Address _____

Home Address _____

Mailing Address _____

Cell Phone # _____ Work Phone _____

Employer Name and Address _____

What type of crime has been committed against you?

_____ **1. IDENTITY THEFT (Choose from the following four options)**

_____ A) Fraudulent bank accounts or loans opened using my personal information
(**MUST** provide supporting documentation and **full** account number).

Bank Name _____ Full Account # _____

Bank Name _____ Full Account # _____

Bank Assigned Claim/Report Number (if applicable) _____

_____ B) Fraudulent credit card accounts (including store cards such as Home Depot, Sears)
opened using my personal information (**MUST** provide supporting documentation such
as credit report or account application and **full** account number).

Business _____ Full Account # _____

Business _____ Full Account # _____

Business _____ Full Account # _____

_____ C) Fraudulent utility accounts (electric, water, cable, phone) opened using my personal information (**MUST** obtain **full** account number, service address and phone numbers related to fraudulent accounts).

_____ D) Employment obtained by someone using my personal information (**MUST** order a copy of your Personal Earnings and Benefits Estimate (PEBES) 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). **NOTE:** IRS has jurisdiction over tax related matters.

_____ **2. BANK ACCOUNT FRAUD (Read all options before choosing)**

_____ **Stolen checks** have been negotiated against my checking account (**MUST** provide copies of front and back of all fraudulent checks and statement copies showing checks negotiated against the account. If checks were altered, please provide a copy of the original check as well).

Bank Name _____ Full Account # _____

Check # _____ Amount _____

Bank Assigned Claim/Report Number (if applicable) _____

Was your signature forged on the stolen checks? **YES** _____ **NO** _____

Do you know who stole your checks? **YES** _____ **NO** _____

Please provide detailed explanation of how and when checks were stolen (*ex. checkbook stolen during burglary, stolen out of the mail and altered, etc*). *Suspect information can be provided on a later page.*

_____ **Fraudulent checks** made using my checking account number (**MUST** provide copies of front and back of all fraudulent checks and bank statements showing checks negotiated against the account).

Bank Name _____ Full Account # _____

Check # _____ Amount _____

Check # _____ Amount _____

Check # _____ Amount _____

Bank Assigned Claim/Report Number (if applicable) _____

_____ **#3 UNAUTHORIZED WITHDRAWALS MADE FROM MY ACCOUNT, NOT INCLUDING DEBIT CARD TRANSACTIONS** (**MUST** provide a copy of bank statements showing unauthorized withdrawals).

Bank Name _____ Full Account # _____

Withdrawal Date _____ Amount _____

Withdrawal Date _____ Amount _____

Bank Assigned Claim/Report Number (if applicable) _____

_____ **#4 DEBIT/CREDIT ACCOUNT FRAUD (Read all options before choosing)**

_____ **My debit/credit cards were lost or stolen** (**MUST** provide a copy of bank statements showing fraudulent transactions to include transaction date, time, amount, and location). Provide the card number the fraud occurred on, not your new card # or bank account #.

Bank Name _____ Full Card # _____

Bank Name _____ Full Card # _____

Bank Name _____ Full Card # _____

Bank Assigned Claim/Report Number (if applicable) _____

_____ **I still have possession of my debit/credit card but my card number was used fraudulently (MUST provide a copy of bank statements showing fraudulent transactions to include transaction date, time, amount, and location). Provide the card number the fraud occurred on, not your new card # or bank account #.**

Bank Name _____ Card Number _____

Fraud Claim/Report # (if applicable) _____

When did you become aware of the crime committed? _____

How did you become aware of the crime committed against you?

Please provide a **detailed** explanation (ex. contacted by bank, fraudulent transactions listed on bank statement, notified when attempting to open a new account, contacted by creditor, etc...)

Do you have suspect information in the crime committed against you? Yes _____ No _____

If you know who committed the crime provide the following information:

Name _____ Date of Birth _____

Address _____

Phone Number _____ Relationship to you _____

Did you ever give the suspect permission to use your personal information, debit/credit cards, or bank account number for any reason? YES _____ NO _____

If you answered yes, please provide an explanation of what was authorized and why:

Provide a detailed explanation why you believe this person committed the crime-

FRAUD AFFIDAVIT (THIS AFFIDAVIT MUST BE NOTARIZED**)**

PLEASE ANSWER ALL OF THE FOLLOWING QUESTIONS:

Did you authorize anyone to use your name or personal information to seek employment, loans, goods or services? YES_____ NO_____

Did you receive any benefit, money, goods or services as a result of the crime committed against you? YES_____ NO_____

I **AM** willing to assist in the prosecution of the person(s) who committed the crime against me, even if the suspect is known to me? (*An answer of **NO** will result in this case not being investigated*). YES_____ NO_____

If you have reported this crime to any other law enforcement agencies, please provide the following information:

Agency Name- _____ Detective Name (if known) _____

Date of Report- _____ Case Number- _____

Agency Name- _____ Detective Name (if known) _____

Date of Report- _____ Case Number- _____

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

Signature: _____ Date: _____

NOTARY SECTION:

State of Oregon

County of _____

Signed (or attested) before me on (date) _____, 20 _____

By (name(s) of individual(s)) _____

_____ My Commission Expires _____

Notary Public – State of Oregon

Official Stamp

Document Description

This certificate is attached to page ____ of a Fraud Affidavit, dated _____, 20_____, consisting of _____ pages.