IDENTITY THEFT

What to do if it happens to you

City of Elk River
Police Department

Chief of Police
Ron Nierenhausen
Elk River Police Department
13077 Orono Parkway
Elk River, MN 55330
763-635-1200
If You Are A Victim

Sometimes an identity thief can strike even if you have been very careful about keeping your personal information to yourself. If you suspect that your personal information has been used to commit fraud or theft, take action immediately, and keep a record of your conversations and correspondences. You may want to use the form “Chart Your Course Of Action”. Exactly which steps you should take to protect yourself depends on your circumstances and how your identity has been misused. However, four basic actions are appropriate in almost every case.

Your First Four Steps

1. Call the toll-free fraud number of any one of the three major credit bureaus to place a fraud alert on your credit reports. One call will establish the fraud alert on all three.

As soon as the credit bureau confirms your fraud alert, all three credit reports will be sent to you, free of charge.

   - Equifax- to report fraud call, 1-800-525-6285, and write: P.O. Box 740241, Atlanta, GA 30374-0241
   - Experian- to report fraud call, 1-888-397-3742, and write P.O.Box 9532, Allen, TX 75013
   - TransUnion- to report fraud call, 1-800-680-7289, and write: Fraud Victim Assistance Division P.O. Box 6790, Fullerton, CA 92834-6790

Once your fraud alert has been placed you should continue to check your reports periodically, especially in the first year after the theft, to make sure no new fraudulent activity has occurred.

2. Close any accounts that have been tampered with or opened fraudulently.
   This includes credit cards, ATM cards, bank and checking accounts. You should contact these major check verification companies:
   - TeleCheck- 1800-710-9898 or 1-800-927-0188
   - Cercegy, Inc.-1800-437-5120
   - International Check Services-1800-631-9656

To find out if the identity thief has been passing bad checks in your name call:

SCAN-1800-262-7771
3. File a report with the Police or Sheriff’s department where you live.

Keep a copy of the report. You may need it to validate your claims to a creditor.


The FTC can refer victims to other appropriate government agencies and companies for further action. To file a complaint or to learn more about the FTC’s Privacy Policy, visit www.consumer.gov/idtheft. If you don’t have access to the Internet, you can call the FTC’s Identity Theft Hotline: toll-free 1-877-438-4338; TDD: 202-326-2502 or write: Identity Theft Clearinghouse, Federal Trade Commission, 600 Pennsylvania Avenue, NW, Washington, DC 20580.

INTERNET FRAUD

Many of the fraud schemes present in the real world can now be found on the Internet. The crucial difference in fraud committed over the Internet is that the perpetrators can “virtually” vanish leaving consumers wondering who or where to turn for help.

An Internet Fraud Complaint Center was created by a cooperative agreement between the FBI and the National White Collar Crime Center. The IFCC has dedicated a website www.ifccfbi.gov to give consumers nationwide the ability to file internet fraud complaints. We recommend you go to this website to file your complaint.

The IFCC reviews the complaints and determines the correct jurisdiction. It then disseminates the information to appropriate local, stated and federal law enforcement agencies for criminal, civil or administrative action as needed.

The IFCC receives over 1000 complaints a week concerning Internet fraud. They maintain a data base and as additional complaints regarding the same suspect comes in, the information is linked and forwarded to the appropriate agencies.
SAMPLE DISPUTE LETTER-CREDIT BUREAU

Date
Your Name
Your Address
Your City, State, Zip Code

Complaint Department
Name of Credit Bureau
Address
City, State, Zip Code

Dear Sir or Madam:
I am writing to dispute the following information in my file. The items I dispute also are circled on the attached copy of the report I received. Identify item(s) disputed by name of source, such as creditors or tax court, and identify type of item, such as credit account, judgment, etc.

I am a victim of identity theft, and did not make the charge(s). I am requesting that the item be clocked to correct my credit report.

Enclosed are copies of (Use this sentence if applicable and describe any enclosed documentation) supporting my position. Please investigate this (these) matter(s) and block the disputed item(s) as soon as possible.

Sincerely,

Your name

Enclosures (list what you are enclosing)

SAMPLE DISPUTE LETTER-FOR EXISTING CREDIT ACCOUNTS

Date
Your Name
Your Address
Your City, State, Zip Code
Your Account Number

Name of Creditor
Billing Inquiries
Address
City, State, Zip Code

Dear Sir or Madam:
I am writing to dispute a fraudulent (charge or debit) attributed to my account in the amount of $_____. I am a victim of identity theft, and I did not make this (charge or debit). I am requesting that the (charge be removed or the debit reinstated), that any finance and other charges related to the fraudulent amount be credited as well, and that I receive an accurate statement.

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

Sincerely,

Your Name

Enclosures (list what you are enclosing.)
Chart Your Course of Action

Use this form to record the steps you've taken to report the fraudulent use of your identity. Keep this list in a safe place for reference.

Credit Bureaus — Report Fraud

<table>
<thead>
<tr>
<th>Bureau</th>
<th>Phone Number</th>
<th>Date Contacted</th>
<th>Contact Person</th>
<th>Comments</th>
</tr>
</thead>
<tbody>
<tr>
<td>Equifax</td>
<td>1-800-525-6285</td>
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<tr>
<td>Experian</td>
<td>1-888-397-3742</td>
<td></td>
<td></td>
<td></td>
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<tr>
<td>TransUnion</td>
<td>1-800-680-7289</td>
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</tbody>
</table>

Banks, Credit Card Issuers and Other Creditors
(Contact each creditor promptly to protect your legal rights.)

<table>
<thead>
<tr>
<th>Creditor</th>
<th>Address and Phone Number</th>
<th>Date Contacted</th>
<th>Contact Person</th>
<th>Comments</th>
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Law Enforcement Authorities — Report Identity Theft

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<thead>
<tr>
<th>Agency/Deptment</th>
<th>Phone Number</th>
<th>Date Contacted</th>
<th>Contact Person</th>
<th>Report Number</th>
<th>Comments</th>
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</thead>
<tbody>
<tr>
<td>Federal Trade Commission</td>
<td>1-877-IDTHEFT</td>
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<td>Local Police Department</td>
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MINNESOTA DEPARTMENT OF PUBLIC SAFETY
DRIVER AND VEHICLE SERVICES

Confirmation of Identity (Driving Record Flag)
(for victims of identity theft)

Print this completed form. This form can be mailed or submitted in person to Driver and Vehicle Services, 445 Minnesota Street - Ste. 170, St. Paul, Minnesota 55101-5170. It may also be faxed to (651) 282-2463.

- If you have questions or need additional information, please contact DVS at (651) 296-2025 or (651) 282-6555 (TTY).

- The Minnesota Department of Public Safety recognizes that the misuse of your identity by someone else is a serious problem. We would like to help you as much as possible. Upon receipt of this completed form, we will make an entry on your driving record. This "flag" will alert law enforcement officers that someone else may be using your identity.

- This flag should prevent someone from successfully using your name when involved with law enforcement. Keep in mind, however, that these efforts will not prevent the use of your name in financial matters, such as establishing credit or other accounts.

- It is important for you to know that this flag may cause you inconvenience if you have contact with law enforcement personnel. For your own protection, we recommend that you have your Minnesota driver's license or identification card with you at all times.

- If you choose to have your record flagged, please complete the information below and return this form to Driver and Vehicle Services, Driving Record Flag Request, 445 Minnesota Street, St. Paul, MN 55101-5170.

Name (LAST, FIRST, MIDDLE INITIAL) _____________________________________________ Date of Birth (mm/dd/yy) __________________________

Driver's License Number

[ ] - [ ] [ ] [ ] [ ] - [ ] [ ] [ ]

I request that my driving record be flagged to alert law enforcement personnel that someone else may be using my identity. I understand that this flag will remain on my record until I send a written request to Driver and Vehicle Services to remove it.

Signature _____________________________________________ Date (mm/dd/yy) ______________________________

Witness (NOTARY PUBLIC OR DRIVER AND VEHICLE SERVICES REPRESENTATIVE) Date (mm/dd/yy) __________________

Subscribed and sworn to before me this ______ day of _______ 20__

NOTARY PUBLIC ___________________________________________________________________________

COUNTY: ________________________________________________________________________________

MY COMISSION EXPIRES: __________________________________________________________________

PS31300-09 (10/11)