

[Your Name]
[Your Address]
[City, State, Zip Code]
[Email Address]
[Phone Number]
[Date]

[Recipient Name]
[Recipient Title/Organization]
[Recipient Address]
[City, State, Zip Code]

Subject: Affidavit of Identity Fraud

I, [Your Full Name], being duly sworn, do hereby declare and affirm the following:

1. I am a resident of [City, State] and my date of birth is [Your Date of Birth].
2. I am writing this affidavit to report a case of identity fraud that has affected me.
3. On [Date of Incident], I discovered that [describe how you found out about the identity theft, e.g., receiving notices of accounts or transactions that you did not authorize].
4. I have not authorized any transactions or applications made in my name by [name of the perpetrator, if known].
5. The following accounts and/or transactions are fraudulent:
 - Account/Transaction #1: [Details]
 - Account/Transaction #2: [Details]
6. I have taken the necessary steps to report this identity theft to [mention any organizations you've contacted, e.g., credit bureaus, law enforcement] and have provided them with my details and supporting documentation.
7. I affirm that the statements made in this affidavit are true and accurate to the best of my knowledge.

I understand that providing false information in this affidavit may constitute a crime under the laws of [Your State/Region].

Executed on this [Date] day of [Month, Year].

[Your Signature]
[Your Printed Name]
[Notary Public Section]
State of [State]
County of [County]

Subscribed and sworn before me this [Date] day of [Month, Year].

[Notary Public Signature]
[Notary Public Name]
My Commission Expires: [Expiration Date]