

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

[Recipient Name]
[Recipient Title/Position]
[Company/Organization Name]
[Company Address]
[City, State, ZIP Code]

Subject: Affidavit of Identity Theft

Dear [Recipient Name],

I, [Your Full Name], residing at [Your Address], do hereby declare and affirm the following regarding the identity theft that has occurred in my name:

1. I believe that my personal information, including but not limited to my name, Social Security number, and financial information, has been unlawfully used by another individual without my consent or knowledge.
2. This identity theft was first discovered on [Date of Discovery], when I noticed [describe the relevant incident, e.g., unauthorized charges, collection notices, bank statements].
3. I have taken the following actions in response to this identity theft:
 - [List actions taken, e.g., contacted credit bureaus, filed a police report, alerted banks/creditors, etc.]
 - [Any additional steps taken]
4. I understand that it is essential to report this identity theft to ensure that all fraudulent activities are addressed and my credit history is protected.
5. I request that [Company/Organization Name] take the appropriate actions to rectify this situation and remove any false information that may have been reported under my name.

I am prepared to provide additional documentation to support my claims and am willing to cooperate fully in resolving this matter.

Sincerely,

[Your Signature]
[Your Printed Name]
[Notary Section if required]
[Notary Signature and Seal]
[Date]