

[Your Name]
[Your Address]
[City, State, ZIP Code]
[Email Address]
[Phone Number]
[Date]
[Recipient Name]
[Recipient Title/Department]
[Company/Organization Name]
[Company Address]
[City, State, ZIP Code]

Subject: Affidavit of Identity Theft

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

1. I am a resident of [Your City, State], and my date of birth is [Your Date of Birth].

2. I am making this affidavit to report that I have been a victim of identity theft.

3. On [Date of Incident], I discovered that [describe the identity theft incident, such as unauthorized accounts, transactions, etc.].

4. I did not authorize any transactions or accounts opened in my name related to this incident.

5. I have taken steps to mitigate the damage, including [list any actions taken, such as contacting credit bureaus, filing a police report, etc.].

6. Attached are copies of relevant documents supporting my claims [list any attached documents if applicable].

I hereby declare under penalty of perjury that the foregoing is true and correct.

Signature: _____

[Your Printed Name]

Subscribed and sworn to before me this ____ day of _____, 20__.

[Notary Public Signature]

[Notary Public Name]

[Notary Public Seal]