

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

[Recipient Name or Institution]
[Recipient Address]
[City, State, Zip Code]

Subject: Affidavit of Identity Theft

I, [Your Full Name], hereby declare under penalty of perjury that the following is true and correct:

1. I am a resident of [Your City and State].
2. My date of birth is [Your Date of Birth].
3. I have been a victim of identity theft.
4. The unauthorized use of my personal information occurred on or about [Date of Occurrence].
5. I first became aware of the identity theft on [Date You Discovered the Theft].
6. The personal information that has been compromised includes [List the Information, e.g., Social Security Number, credit card number, etc.].
7. [Optional: Briefly explain how you discovered the identity theft and any steps you have taken to report it.]

I am affirming that I have taken the necessary steps to report this identity theft to the appropriate authorities, including but not limited to [Mention any law enforcement or credit reporting agencies that you have contacted].

I understand that this affidavit may be used as evidence of the identity theft for any necessary legal or administrative purposes.

Signed,

[Your Signature]
[Your Printed Name]
[Date]
[Optional Notary Public Acknowledgment]