

Instructions for Completing the Identity Theft Affidavit

Tomake certain that you do not become responsible for any debts incurred by an identity thief, you must prove to American First Finance ("AFF") that you didn't create the debt by fully completing this Identity Theft Affidavit.

It will be necessary to provide the information in this affidavit anywhere a new account was opened in your name or an existing account was affected by identity theft. The information will enable AFF to investigate the fraud and decide the outcome of your claim.

This affidavit has two parts:

- Part One the Identity Theft Affidavit

 is where you report general
 information about yourself and the
 theft.
- Part Two the Fraudulent Account
 Statement is where you describe the
 fraudulent account(s) opened in your
 name.

When you send the affidavit to American First Finance, attach copies (NOT originals) of any supporting documents (for example, driver's license or police report). Before submitting your affidavit, review the disputed account(s) with family members or friends who may have information about the account(s) or access to them.

Complete this affidavit as soon as possible. Delays on your part could slow the investigation.

Be as accurate and complete as possible. You may choose not to provide some of the information requested. However, incorrect or incomplete information will slow the process of investigating your claim and absolving the debt. Print clearly.

When you have finished completing the affidavit, mail a notarized copy to American First Finance at:

P.O. Box 565848 Dallas, Texas 75356

<u>Or</u> email a scanned and notarized copy to: **Compliance@AmericanFirstFinance.com**.

Attach a copy of the Fraudulent Account Statement and any other supporting documentation you are able to provide.

American First Finance will review your claim and send you a written response telling you the outcome of their investigation. Keep a copy of everything you submit.

If you are unable to complete the affidavit, a legal guardian or someone with power of attorney may complete it for you. Except as noted, the information you provide will be used only by AFF to process your affidavit, investigate the events you report, and help stop further fraud.

Completing this affidavit does not guarantee that the identity thief will be prosecuted or that the debt will be cleared.



If you haven't already done so, report the fraud to the following organizations:

- I. Any one of the nationwide consumer reporting companies to place a fraud alert on your credit report. Fraud alerts can help prevent an identity thief from opening any more accounts in your name. The company you call is required to contact the other two, which will place an alert on their versions of your report, too.
 - Equifax: 1-800-525-6285;
 www.equifax.com
 - Experian: I-888-EXPERIAN (397-3742); www.experian.com
 - TransUnion: 1-800-680-7289; www.transunion.com

In addition to placing the fraud alert, the three consumer reporting companies will send you free copies of your credit reports, 4. The Federal Trade Commission. By sharing and, if you ask, they will display only the last your identity theft complaint with the FTC, you will provide important information that can help law enforcement officials across

2. The security or fraud department of each company where you know, or believe, accounts have been tampered with or opened fraudulently. Close the accounts. Follow up in writing and include copies (NOT originals) of supporting documents. It's important to notify credit card companies and banks in writing. Send your letters by certified mail, return receipt requested, so you can document what the company received and when. Keep a file of your correspondence and enclosures.

When you open new accounts, use new Personal Identification Numbers (PINs) and

- passwords. Avoid using easily available information like your mother's maiden name, your birth date, the last four digits of your Social Security number or your phone number, or a series of consecutive numbers.
- 3. Your local police or the police in the community where the identity theft took place to file a report. Get a copy of the police report or, at the very least, the number of the report. It can help you deal with creditors who need proof of the crime. If the police are reluctant to take your report, ask to file a "Miscellaneous Incidents" report, or try another jurisdiction, like your state police. You also can check with your state Attorney General's office to find out if state law requires the police to take reports for identity theft. Check the Blue Pages of your telephone directory for the phone number or check www.naag.org for a list of state Attorneys General.
- 4. The Federal Trade Commission. By sharing your identity theft complaint with the FTC, you will provide important information that can help law enforcement officials across the nation track down identity thieves and stop them. The FTC also can refer victims' complaints to other government agencies and companies for further action, as well as investigate companies for violations of laws that the FTC enforces.

You can file a complaint online at www.consumer.gov/idtheft. If you don't have Internet access, call the FTC's Identity Theft Hotline, toll-free: I-877-IDTHEFT (438-4338); TTY: I-866-653-4261; or write: Identity Theft Clearinghouse, Federal Trade Commission, 600 Pennsylvania Avenue, NW, Washington, DC 20580.



Identity Theft Affidavit

	N					
	My full legal name is _	(First)	(Middle)	(L	ast)	(Jr., Sr., II
	(If different from above) When the events described in this affidavit took place, I was known as					
	(First)	(Middle)	(Lası	t)	(Jr.	, Sr., III)
	My date of birthis	(day/month/ye	ar)			
	My Social Security nu	ımber is				
	My driver's license or identification card state and number are					
My current address is						
	City		_State		_Zip Code _	
	I have lived at this add	dress since	(month/year)			
(If different from above) When the events described in this affidavit took place, my address was					address was	
	City		State		Zip Code	
)	I lived at the address		nuntil month/year)			
)	My daytime telephon	e number is ()			
	My evening telephone	e number is ()			



How the Fraud Occurred

Check all that apply for items 11 - 15:								
(II) I did not authorize anyone to use my name or personal information to seek the money, credit, loans, goods or services described in this report.								
(12) My credit report contains the following incorrect information as a result of this identity theft:								
(13) \Box I did not receive any benefit, goods or services as a result of the fraud that occurred.								
(14) My identification documents (for example, credit cards; birth certificate; driver's license; Social Security card; etc.) were: stolen lost on or about								
	(day/month/year)							
(15) To the best of my knowledge and belief, the following person(s) used my information (for example, my name, address, date of birth, existing account numbers, Social Security number, mother's maiden name, etc.) or identification documents to get money, credit, loans, goods or services without my knowledge or authorization:								
Name (if known)	Name (if known)							
Address (if known)	Address (if known)							
Phone number(s) (if known)	Phone number(s) (if known)							
(16) I do NOT know who used my information or identification documents to get money, credit, loans, goods or services without my knowledge or authorization.								
(17) Please provide a detailed statement describing the questionable activity and documentation that is being requested: (For example, description of the fraud, which documents or information were used or how the identity thief gained access to your information.)								



(Attach additional pages as necessary.)



Victim's Law Enforcement Actions (18) (check one) I \square am \square am not willing to assist in the prosecution of the person(s) who committed this fraud. (19) (check one) I \square am \square am not authorizing the release of this information to law enforcement for the purpose of assisting them in the investigation and prosecution of the person(s) who committed this fraud. (20) (check all that apply) I \Box have \Box have not reported the events described in this affidavit to the police or other law enforcement agency. The police \Box did \Box did not write a report. In the event you have contacted the police or other law enforcement agency, please complete the following: (Officer/Agency personnel taking report) (Agency #1) (Date of report) (Report number, if any) (Phone number) (email address, if any) (Agency #2) (Officer/Agency personnel taking report) (Date of report) (Report number, if any) (Phone number) (Email address, if any)

Documentation Checklist

Please indicate the supporting documentation you are able to provide. Attach copies (NOT originals) to the affidavit.

- (21) A copy of a valid government-issued photo-identification card (for example, your driver's license, state-issued ID card or your passport). If you are under 16 and don't have a photo-ID, you may submit a copy of your birth certificate or a copy of your official school records showing your enrollment and place of residence.
- (22) Proof of residency during the time the disputed bill occurred, the loan was made or the other event took place (for example, a rental/lease agreement in your name, a copy of a utility bill or a copy of an insurance bill).



(23) A copy of the report you filed with the police or sheriff's department. If you are unable to obtain a report or report number from the police, please indicate that in Item 19.

Signature

I certify that, to the best of my knowledge and belief, all the information on and attached to this affidavit is true, correct, complete, and made in good faith. I also understand that is affidavit or the information it contains may be made available to federal, state, and/or local law enforcement agencies for such action within their jurisdiction as they deem appropriate. I understand that knowingly making any false or fraudulent statement or representation to the government may constitute a violation of 18 U.S.C. §1001 or other federal, state, or local criminal statutes, and may result in imposition of a fine or imprisonment or both. By signing this affidavit, I agree to authorize American First Finance to release information pertaining to this investigation.

signature)	(date signed)	

Reminder: Be sure to enclose a copy of at least one of the following identifications:

- Current US Driver's License with photo
- Current State Issued Identification card with photo
- Current Passport
- Current Military Identification card

Mail this Information to:

OR

Email a scanned copy of this Information to:

P.O. Box 565848 Dallas, Texas 75356 compliance@americanfirstfinance.com



Fraudulent Account Statement

Completing this Statement:

- List only the account(s) you're disputing with AFF.
- If a collection agency sent you a statement, letter or notice about the fraudulent account, attach a copy of that document (**NOT** the original).

I declare that as a result of the event(s) described in this Identity Theft Affidavit, the following account(s) was/were opened at AFF in my name without my knowledge, permission or authorization using my personal information or identifying documents:

Acco Num	Type of unauthorized credit/goods/services provided by AFF (if known)	Date issued or opened	Amount/Value provided (the amount charged or the cost of the goods/services)
	it opened fraudulently? It an existing account that s	someone tamper	(Yes or No) ed with? (Yes or No)