CAÑON CITY POLICE DEPARTMENT IDENTITY THEFT REPORT

Victim’s Name __________________________ Case Number ____________

Victim’s Phone Number ________________________________

For Law Enforcement Use Only:

Crime Classification _______________________________________

C.R.S. ___________________________________________________

☐ I am willing to assist in prosecution of the person(s) who committed this fraud or forgery.

☐ I am NOT willing to assist in prosecution and am obtaining this case number for bank purposes only. I understand that by choosing not to assist my case will NOT be investigated.

Signature ______________________________ Date ______________

For the protection of your personal identifying information we require you mail or deliver this completed packet and all supporting documentation to:

Cañon City Police Department
ATTN: ID THEFT REPORTS
161 Justice Center Road
Cañon City, Colorado 81212
CAÑON CITY POLICE DEPARTMENT IDENTITY THEFT REPORT

Victim’s Name __________________________ Case Number __________

Victim’s Phone Number __________________________

Victim Information

(1) My full legal name is __________________________
   (First)  (Middle)  (Last)  (Jr., Sr., III)

(2) (If different from above) When the events described in this incident took place, I was known as:
   __________________________
   (First)  (Middle)  (Last)  (Jr., Sr., III)

(3) My date of birth is _______________. My place of birth: __________________________
   (Month/Day/Year)  (City/State)

(4) My Social Security number is __________________________. Race _____ Sex _____

(5) My physical description: Height _____ Weight _____ Hair _____ Eye _____

(6) My driver’s license or identification card number is: __________________________

(7) My driver’s license or identification card was issued by __________________________
   (State of Issue)

(8) My current address is: __________________________ Apt. _____
   City: __________________________ State: _________ Zip Code: __________

(9) I have lived at this address since __________________________
   (Month/Year)

(10) (If different from above) When the events described in this incident took place, my address was:
    __________________________

(11) I lived at the address in item 10 from __________________________ to __________________________
    (Month/Year)  (Month/Year)

(12) My daytime telephone number is: __________________________
    (Include area code)

(13) My evening telephone number is: __________________________
    (Include area code)

(14) My cell phone number is: __________________________
    (Include area code)

(15) My email address is: __________________________
CAÑON CITY POLICE DEPARTMENT IDENTITY THEFT REPORT

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How the Identity Theft Occurred

Please check those which apply:

☐ There are unauthorized charges on credit/debit card

☐ My credit/debit card is still in my possession

☐ My credit/debit card has been stolen

☐ My credit/debit card has been lost

☐ Suspect used name, date of birth, social security number or other personal identifying information to obtain a thing of value or create identification

☐ Suspect used checking account number and/or other bank information to make counterfeit checks or altered/forged my real checks.

☐ Other (please describe): ______________________________________________________

_____________________________________________________________________________

Do you have suspect information? Yes______ No ______

If yes, how did you get this information: __________________________________________

_____________________________________________________________________________

_____________________________________________________________________________

Suspect Name (if known): ________________________________________________________

Suspect Address (if known) _______________________________________________________

Phone number(s) (if known) _____________________________________________________

Additional Suspects/Suspect Information if known: _________________________________

_____________________________________________________________________________

_____________________________________________________________________________
Please write a statement about what happened in this incident, how you found out about it and who you have spoken with. Please include dates, times and locations. (Use additional sheets if necessary.)

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CAÑON CITY POLICE DEPARTMENT
IDENTITY THEFT REPORT

Victim’s Name __________________________  Case Number __________

Victim’s Phone Number ______________________________

Documentation Checklist
Please provide the following documentation with your police report to allow a more complete investigation.

☐ 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.

☐ A copy of the report you have filed with other police or sheriff’s departments. If you are unable to obtain a report, please provide the case report number(s).

☐ All bank statements, credit card statements and other documents showing fraudulent charges, fraudulent applications or financial disputes. Please include account numbers and/or credit card numbers.

☐ Documents showing date(s), time(s), location(s), and phone number(s) of fraudulent activity.

I declare, under penalty of prosecution, that the information I have provided in this police report is true and correct to the best of my knowledge.

Signature ___________________________________________  Date ________________