



**STATE OF NEVADA
DEPARTMENT OF EMPLOYMENT, TRAINING AND REHABILITATION
EMPLOYMENT SECURITY DIVISION
Allegation of Identity Theft Notice**

Date:

Social Security Number:

You have provided information someone other than yourself has filed for unemployment benefits using your personal information ***or*** someone has worked using your name and/or social security number. Identity theft is a growing national concern. In order to investigate your allegation, you will need to complete the attached "*Identity Theft Victim's Complaint and Affidavit*" form. **Without this necessary information, we will be unable to pursue your allegation of identity theft.**

No benefits can be paid until this issue can be resolved. If you have been receiving benefits, be aware your payment of benefits will be held until our investigation is completed. The Employment Security Division recognizes this is an inconvenience, however, be assured this is a needed protection of your identity and prevention of your benefits being claimed by someone else.



Reply to:

**Employment Security Division
Integrity Programs
500 East Third Street
Carson City, NV 89713
Telephone: 775-684-0475 Fax: 775-684-0418**



**Nevada Employment Security Division
Recommended Identification Documents**

One from Column A

AND One from Column B

AND One from Column C

<p>A.</p> <ul style="list-style-type: none"> ➤ A U.S. passport ➤ A certificate of U.S. citizenship ➤ A naturalization certificate ➤ An unexpired foreign passport if the passport has an unexpired endorsement by the Attorney General for work in the U.S., or ➤ A resident alien card or registration card if it contains a photograph and is evidence of authorization for employment ➤ Temporary Resident Card, INS Form I-688 ➤ Employment Authorization Card, INS Form I-688A <p>In the event the candidate cannot present one document satisfying both requirements, other documents -- one each from categories 2 & 3 -- must be examined.</p>	<p>B.</p> <ul style="list-style-type: none"> ➤ Social Security card (unless it states on its face that it does not authorize employment) ➤ U.S. Birth Certificate ➤ Any other document approved by Attorney General ➤ An unexpired reentry permit INS Form I-327 ➤ An unexpired Refugee Travel document INS Form I-571 ➤ A certification of birth issued by the Department of State, Form FS-545 ➤ An employment authorization document issued by INS ➤ Native American tribal document ➤ U.S. citizen I.D. card INS Form I-197 ➤ I.D. card for use of resident citizen in the United States INS Form I-179 	<p>C.</p> <p>Identification</p> <ul style="list-style-type: none"> ➤ Driver's license or state I.D. card if it contains a photograph or other sufficient identifying information ➤ Other identification approved by the Attorney General ➤ School identification card with a photograph ➤ Vote registration card ➤ U.S. Military card ➤ I.D. card issued by federal, state, or local government agencies or entities ➤ Military dependent's I.D. card ➤ Native American tribal document ➤ U.S. Coast Guard Merchant Mariner card ➤ Canadian driver's license
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At the Time of the Fraud:

9. My full legal name was: _____
First Middle Last Suffix

10. My address was: _____
Number & Street Name Apartment, Suite, etc.

City State Zip Code

11. My daytime phone: (____) _____ My evening phone: (____) _____

12. My email: _____

Declarations:

13. I did OR did not authorize anyone to use my name or personal information to work or file unemployment benefits.

14. I did OR did not receive any money, goods, services, or other benefit as a result of the events described in this report.

15. I am OR am not willing to work with law enforcement if charges are brought against the person(s) who committed the fraud.

About the Fraud:

16. I believe the following person used my information or identification documents to file

for unemployment benefits or has worked under my identity. *(Enter what you know about anyone you believe was involved, even if you don't have complete information.)*

Name: _____
First Middle Last Suffix

Address: _____
Number & Street Name Apartment, Suite, etc.

City State Zip Code

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Victim's Name _____ Phone number (____) _____

Phone Numbers: Home (____) _____ Other(____) _____

Additional information about this person: _____

17. Additional information about the crime (for example, how the identity thief gained access to your personal information, Debit Card or PIN information?)

Documentation:

18. I can verify my identity with these documents:

- A valid government-issued photo identification card (for example, my driver's license, state-issued ID card, or my passport).
If you are under 16 and don't have a photo-ID, a copy of your birth certificate or a copy of your official school record showing your enrollment and legal address is acceptable.
- Proof of residency during the time the disputed unemployment claims was filed or employment preformed (for example, a copy of a rental/lease agreement in my name, a utility bill, or an insurance bill).

19. When and how did you discover someone was filing an unemployment claim or working under your name and social security?

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Victim's Name _____ Phone number (____) _____

- 20. How did the identity thief obtain your personal identification information (such as social security number, date of birth and Mother's Maiden Name?):**

- 21. If you were the one who originally filed the unemployment claim, when did you stop filing for unemployment benefits?**

- 22. How do you think the identity thief knew you had an existing unemployment claim to be able to file for benefits under your name?**

- 23. Were you issued an Unemployment Benefits Debit Card? If yes, do you still have control of the card? If no, how and when did you lose control of your debit card?**

- 24. If the Debit Card was lost or stolen, did you notify the Debt Card company? If yes, when? If not, why not?**

Your Law Enforcement Report:

25. One way to get a credit reporting agency to quickly block identity theft-related information from appearing on your credit report is to submit a detailed law enforcement report (“Identity Theft Report”). You can obtain an Identity Theft Report by taking this form to your local law enforcement office, along with your supporting documentation. Ask an officer to witness your signature and complete the rest of the information in this section. It’s important to get your report number, whether or not you are able to file in person or get a copy of the official law enforcement report. Attach a copy of any confirmation letter or official law enforcement report you receive when returning this form to the Employment Security Department Integrity Unit.

Select ONE:

- I have not filed a law enforcement report.
- I was unable to file any law enforcement report.
- I filed an automated report with the law enforcement agency listed below.
- I filed my report in person with the law enforcement officer and agency listed below.

Law Enforcement Department

State

Report Number

Filing Date (mm/dd/yyyy)

Officer’s Name (please print)

Officer’s Signature

Badge Number

(____) _____
Phone Number

Did the victim receive a copy of the report from law enforcement officer?

- Yes OR No

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Victim's Name _____ Phone number(____) _____

Signature:

As applicable, sign and date IN THE PRESENCE OF a law enforcement officer or Notary Public.

26. I certify that, to the best of my knowledge and belief, all of the information on the attached to this complaint is true, correct, and complete and made in good faith. I understand that this complaint 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 violate federal, state, or local criminal statutes, and may result in a fine, imprisonment, or both.

Signature

Date Signed (mm/dd/yyyy)

Your Affidavit:

27. If you do not choose to file a report with law enforcement, you may use this form as an Identity Theft Affidavit to prove the thief misused your information that you are not responsible for the fraud.

State of Nevada
County of _____

Signed and sworn to (or affirmed) before me on _____ by

(name(s) of person(s) making statement)

(Seal, if any) _____
(Signature of notarial officer)

(Title and rank (optional))