

Identity Theft Affidavit

Date: [Insert Date]

Claim Number: [Insert Claim Number]

To Whom It May Concern,

I, [Your Full Name], residing at [Your Address], hereby declare under penalty of perjury that I am a victim of identity theft. I am writing this affidavit to support my insurance claim regarding unauthorized transactions made in my name.

Details of Identity Theft:

- Name of Unauthorized User: [Insert Name]
- Type of Fraud: [Describe the type of fraud]
- Date(s) of Fraudulent Activity: [List Dates]
- Account(s) Affected: [List Accounts]

I have reported this identity theft to the appropriate authorities and have taken steps to mitigate the damage, including [briefly describe actions taken, e.g., contacting banks, credit bureaus, etc.].

I am providing copies of the relevant documents to support my claim, including police report, correspondence with lenders, and any other pertinent information.

By signing below, I affirm that the information provided herein is true and accurate to the best of my knowledge and belief.

Sincerely,

[Your Signature]

[Your Printed Name]

[Your Phone Number]

[Your Email Address]