



Case No. _____

Tyler Police Department

711 W. Ferguson Street, Tyler, TX 75702 (903) 531-1090 FAX (903) 531-1063

Credit Card Abuse, Forgery & Fraud

Please complete all blocks of information that are relevant to your case. Once completed, call 903-531-1000 to be scheduled for a telephone report, or come into the north or south police stations for a report to be made in person.

Jurisdiction:

Texas Code of Criminal Procedure 13.29

An offense under Section 32.51, Penal Code (Fraudulent Use or Possession of Identifying Information), may be prosecuted in any county in which the offense was committed or in the county of residence for the person whose identifying information was fraudulently obtained, possessed, transferred, or used.

You may choose to file a report with:

- Your local agency (police, sheriff) where you live or
- Where the fraud occurred.
- Online with the FBI at <https://www.ic3.gov/>
- Your local Secret Service office if Crypto Currency involvement at 903-534-2933
- If you have been defrauded of funds through a cryptocurrency investment scam, please contact the Secret Service at CryptoFraud@SecretService.gov

If you are contacted by the IRS about your Social Security number being utilized:

- Respond immediately to any IRS notice: Call the number provided.

If insurance fraud (including medical) is suspected or has occurred, contact the Texas Insurance Fraud Unit at 800-252-3439 or their website www.tdi.texas.gov/fraud. Please contact the medical provider to check for billing errors in cases involving medical claims to your insurance or Medicare.

If you are not a citizen of Tyler or the fraud did not occur in Tyler, we suggest you start with your local agency or one of the online resources. They will forward the case to the appropriate jurisdiction.

[Type here]

[Type here]

Case No. _____

If your fraud was done online, please file your report with one of the following agencies:

- FBI - <https://www.ic3.gov/>
- FTC – <https://identitytheft.gov>

Required Documents:

Forgery:	Credit Card Abuse / Fraud:
Original check(s) (if available)– Handled in upper right corner – copy otherwise Bank Statements – Preferably 3 months	Any relevant account documents Bank / Account Statements – Preferably 3 months

Without the following complete information we cannot investigate or issue a case number. Any item in bold is required.

*Please note that checks that are returned for insufficient funds (NSF) need to be filed with the Hot Check Division of Smith County at 903-590-1740. These checks will not be investigated as Forgery if written by the account holder.

[Type here]

[Type here]

Case No. _____

Victim Information

Full Legal Name: _____ **DOB:** _____
Residence Address: _____
Driver's License #: _____ **Social Security Number:** _____
Phone Numbers: _____
Email: _____
Business: _____

Declarations

Do you wish to prosecute the offender?

Yes ☐ No ☐

Have you **ever** authorized anyone to use your name or personal information to obtain money, credit, loans, goods, or services- or for any other purpose? If yes, describe in narrative.

Yes ☐ No ☐

Have you **ever** given **any** person authorization to use your debit, credit, checks or other financial accounts? If yes, describe in narrative.

Yes ☐ No ☐

Did you receive **any** money, good, services, or other benefit as a result of the events or compromises described in this report?

Yes ☐ No ☐

[Type here]

[Type here]

Case No. _____

Accounts Impacted

Financial Institution / Business: _____

Point of Contact or Reference _____

Number with Institution: _____

Routing No.: _____

Account No.: _____

Debit / Credit Card No.: _____

Checks or transactions affected: _____

Date Account Opened or Misused: _____

Date Discovered: _____

Total Amount:

\$ _____

Briefly Describe

Improper Actions:

Select One:

- ☐ This account was opened fraudulently.
- ☐ This account was an existing account that someone tampered with.

Accounts Impacted

Financial Institution / Business: _____

Point of Contact or Reference _____

Number with Institution: _____

Routing No.: _____

Account No.: _____

Debit / Credit Card No.: _____

Checks or transactions affected: _____

Date Account Opened or Misused: _____

Date Discovered: _____

Total Amount:

\$ _____

Briefly Describe

Improper Actions:

Select One:

- ☐ This account was opened fraudulently.
- ☐ This account was an existing account that someone tampered with.

[Type here]

[Type here]

Case No. _____

Accounts Impacted

Financial Institution / Business: _____

Point of Contact or Reference _____

Number with Institution: _____

Routing No.: _____

Account No.: _____

Debit / Credit Card No.: _____

Checks or transactions affected: _____

Date Account Opened or Misused: _____

Date Discovered: _____

Total Amount:

\$ _____

Briefly Describe

Improper Actions:

Select One:

- ☐ This account was opened fraudulently.
- ☐ This account was an existing account that someone tampered with.

Accounts Impacted

Financial Institution / Business: _____

Point of Contact or Reference _____

Number with Institution: _____

Routing No.: _____

Account No.: _____

Debit / Credit Card No.: _____

Checks or transactions affected: _____

Date Account Opened or Misused: _____

Date Discovered: _____

Total Amount:

\$ _____

Briefly Describe

Improper Actions:

Select One:

- ☐ This account was opened fraudulently.
- ☐ This account was an existing account that someone tampered with.

[Type here]

[Type here]

Case No. _____

Suspect Information (If Known)

Name: _____ DOB: _____

Residence _____

Address: _____

Driver's License #: _____ Social Security Number: _____

Phone Numbers: _____

Identification Methods: ☐ Government ID Card ☐ Thumb Print

Is Video Available: ☐ Yes ☐ No

****Please prepare video as quickly as possible if it is not submitted with this report.**

If Yes, from Who?
(Name, Number): _____

Vehicle License Plate
Description: _____ (Including State): _____

Witness Information (including clerk / employee involved) (If Known)

Full Legal Name: _____ DOB: _____

Residence _____

Address: _____

Driver's License #: _____ Social Security Number: _____

Phone Numbers: _____

Email: _____

Business: _____

[Type here]

[Type here]

Case No. _____

Statement

Please give a detailed written statement regarding this incident.

Affidavit Signature

I hereby swear and affirm that all the information incorporated in this affidavit is true and accurate to the best of my knowledge. I understand making a false statement is a violation of Texas Penal Code section 37.08 and that I may be prosecuted, if it determined that any portion of this affidavit is knowingly false. I am authorizing any and all entities that may have been party to fraudulent activities using my personal information to release this information to the Tyler Police Department so that they may investigate this offense.

Texas Penal Code 37.08

A person commits an offense if, with intent to deceive, he knowingly makes a false statement that is material to a criminal investigation and makes the statement to:

- (1) a peace officer or federal special investigator conducting the investigation; or*
- (2) any employee of a law enforcement agency that is authorized by the agency to conduct the investigation and that the actor knows is conducting the investigation.*

Signature

Date