



If You Are a Victim of Fraudulent Tax Returns

The Office of Privacy Protection wants to assist victims of taxpayer identity theft by providing resources, tools and education to recover from this crime. We suggest victims of fraudulent tax returns do the following:

Contact the Internal Revenue Service

If your federal income tax return has been denied, call the Internal Revenue Service (IRS) directly. The IRS has established a toll-free hotline specifically for victims of identity theft. You can reach the IRS Identity Protection Unit at 800-908-4490. Complete the attached IRS Form 14039, "Identity Theft Affidavit." Mail the completed form and a photocopy of at least one form of identification (for example: a passport, driver's license, social security card, or other valid US federal or state government issued identification) to the IRS using the address listed on the back of the form.

You will have to submit your federal tax return by mail. You can print off the forms you need from the IRS website: <http://www.irs.gov/individuals/index.html>. Mail your tax paperwork to the address listed on the forms.

If you need help resolving a problem with the IRS or believe an IRS system is not working as it should, contact the IRS Taxpayer Advocate Service. The Taxpayer Advocate Service is an independent organization within the IRS that helps taxpayers in resolving issues with the IRS. They can be reached at 877-777-4778.

Contact the Wisconsin Department of Revenue

If your state income tax return has been denied, call the Wisconsin Department of Revenue (WDOR). If you are the victim of federal income tax fraud and are not sure if your state income tax return has been compromised, call the WDOR to make sure that no one has fraudulently filed your state tax return. You can reach the WDOR at 608-266-2772. You will have to submit your state return by mail. You can print off the forms you need from the WDOR website at: <https://www.revenue.wi.gov/>.

File a police report

Let your local police department know you are the victim of identity theft. They are required to file a report of identity theft even if the theft might have occurred at some other place. Request a copy of the police report for your own records and keep it in a safe place.

Place a fraud alert on your credit report

Immediately call one of the three major credit reporting agencies listed below to put a fraud alert on your credit report. It can help prevent identity thieves from getting credit or opening new bank accounts in your name. The alert will be active for 90 days and can be renewed as often as you like.

Equifax

PO Box 740241
Atlanta, GA 30374
888-766-0008
www.alerts.equifax.com

Experian

PO Box 4500
Allen, TX 75013
888-397-3742
www.experian.com/fraud

TransUnion

PO Box 2000
Chester, PA 19022
800-680-7289
www.transunion.com/fraud

Check and monitor your credit report

Federal law requires each of the three major credit reporting agencies to provide consumers with a FREE copy of their credit report each year. Review your report for any inaccuracies (address, employer, accounts, loans, collection notices, etc.). If you find accounts or information on your credit report that you do not recognize, it might mean that an identity thief is at work. You can obtain your free credit report from Equifax, Experian, and TransUnion by calling 877-322-8228 or going online at www.annualcreditreport.com. By ordering one report from one of the reporting agencies every four months, you can get your free credit report three times a year. If you discover fraudulent accounts or information on your credit report, please file a complaint with the Office of Privacy Protection.

Contact your financial institution

Call your financial institutions and tell them that your personal information has been compromised and that you are concerned about identity theft. Ask them to flag your accounts and notify you of any activity that is unusual. Also, ask what other measures they can take to assist you.

If you find fraudulent charges or accounts in your name, contact the Office of Privacy Protection

If you should discover additional fraud, such as fraudulent charges on your financial accounts or fraudulent information on your credit report, our office can assist you by complete the following forms:

1. Office of Privacy Protection Complaint Form
2. Non-Consent Form (*must be notarized*)
3. Release of Information Authorization Form
4. Copy of your identity theft police report

Send completed forms to:

**Bureau of Consumer Protection
Office of Privacy Protection
2811 Agriculture Drive
PO Box 8911
Madison WI 53708-8911**

**E-MAIL:
DATCPWisconsinPrivacy@wi.gov**

WEBSITE: privacy.wi.gov

Toll-free in WI: (800) 422-7128

(608) 224-5163

FAX: (608) 224-4677

TTY: (608) 224-5058

Identity Theft Affidavit

Complete this form if you need the IRS to mark an account to identify questionable activity.

Section A - Check the following boxes in this section that apply to the specific situation you are reporting (Required for all filers)

- 1. I am submitting this Form 14039 for myself
- 2. I am submitting this Form 14039 in response to a mailed 'Notice' or 'Letter' received from the IRS. If person in **Section C** received IRS 'Notice CP 2000', or other IRS Notice questioning income, follow the instructions on that IRS 'Notice' or 'Letter'.
 - Please provide 'Notice' or 'Letter' number(s) on the **line to the right** _____
- 3. I am submitting this Form 14039 on behalf of my dependent.
Please complete **Section F** on reverse side of this form.
Caution: If you are filing this on behalf of a Minor or Dependent, filing this form will protect his or her tax account but it will **not** prevent the dependent in **Section C** below from being claimed as a dependent by another person.
- 4. I am submitting this Form 14039 on behalf of another person (*other than my dependent*).
 - Please complete **Section F** on reverse side of this form.

Section B - Reason For Filing This Form (Required)

Check only **ONE** of the following boxes that apply to the person listed in **Section C** below.

- 1. **Federal tax records affected** and I am a victim of identity theft
- 2. **Federal tax records not affected** and I am a victim of identity theft, or an event has affected/compromised my personal information placing me at-risk to be a future victim of identity theft.

Please provide an explanation of the identity theft issue, how you became aware of it and provide relevant dates.

Section C - Name and Contact Information of Identity Theft Victim or Potential Victim (Required)

Taxpayer's last name	First name	Middle initial	Taxpayer Identification Number <i>(Please provide your 9-digit SSN or ITIN)</i>
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Current mailing address (*apartment or suite number and street, or P.O. Box*) If deceased, please provide last known address.

City	State	ZIP code
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Tax Year(s) in which you experienced identity theft (<i>If not known, enter 'Unknown' in one of the boxes below</i>)	Last tax year a return was filed								
<table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 12.5%; border: 1px solid black; height: 20px;"></td> <td style="width: 12.5%; border: 1px solid black; height: 20px;"></td> <td style="width: 12.5%; border: 1px solid black; height: 20px;"></td> <td style="width: 12.5%; border: 1px solid black; height: 20px;"></td> <td style="width: 12.5%; border: 1px solid black; height: 20px;"></td> <td style="width: 12.5%; border: 1px solid black; height: 20px;"></td> <td style="width: 12.5%; border: 1px solid black; height: 20px;"></td> <td style="width: 12.5%; border: 1px solid black; height: 20px;"></td> </tr> </table>									

Address used on last filed tax return (<i>If different than 'Current'</i>)	Names used on last filed tax return (<i>If different than 'Current'</i>)
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City (on last tax return filed)	State	ZIP code
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Telephone number with area code (<i>Optional</i>) If deceased, please indicate 'Deceased'	Best time(s) to call
Home telephone number _____ Cell phone number _____	

Language in which you would like to be contacted English Spanish

Section D - State or Federal Issued Identification (Required)

Submit this completed form and a **clear and legible** photocopy of **at least one of the following** documents to verify the identity of the person listed in **Section C** above. **If necessary, enlarge photocopies so all information is clearly visible.**

Check the box next to the document(s) you are submitting:

- Driver's license Social Security Card Passport Valid U.S. Federal or State government issued identification**

** Federal employees should not copy his or her employee identification cards as 18 U.S.C. prohibits doing so.

Section E - Penalty of Perjury Statement and Signature (Required)

Under penalty of perjury, I declare that, to the best of my knowledge and belief, the information entered on this Form 14039 is true, correct, complete, and made in good faith.

Signature of taxpayer, or representative, conservator, parent or guardian	Date signed
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Section F – Representative, conservator, parent or guardian information (Required if completing Form 14039 on someone else's behalf)

Check only **ONE** of the following five boxes next to the reason you are submitting this form

- 1. The taxpayer is deceased and I am the surviving spouse.** (No attachments are required, including death certificate)
- 2. The taxpayer is deceased and I am the court-appointed or certified personal representative.**
Attach a copy of the court certificate showing your appointment.
- 3. The taxpayer is deceased and a court-appointed or certified personal representative has not been appointed.**
 - o Attach copy of death certificate or formal notification from a government office informing next of kin of the decedent's death.
 - o Indicate your relationship to decedent: Spouse Child Parent/Legal Guardian Other _____
- 4. The taxpayer is unable to complete this form and I am the appointed conservator or have Power of Attorney/Declaration of Representative authorization per IRS Form 2848.**
 - o Attach a **copy** of documentation showing your appointment as conservator or POA authorization.
 - o If you have an IRS issued **Centralized Authorization File (CAF) number, enter the nine-digit number:**

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- 5. The victim or potential victim is a 'minor'. 'Minor' as defined per the state in which 'minor' resides.**
By checking this box and signing below you are indicating that you are an authorized representative, as parent, guardian or legal guardian, to file a legal document on the child's behalf.
 - o Indicate your relationship to minor: Parent/Legal Guardian Fiduciary Relationship per IRS Form 56
 Power of Attorney Other _____

Representative's name		
Last name	First name	Middle initial
Last four digits of Representative's Taxpayer ID number	Representative's telephone number (include area code)	
Representative's current mailing address (apt., suite no. and street, or P.O. Box)		
City		State
		ZIP code

Instructions for Submitting this Form

Submit this to the IRS via **Mail** or **FAX** to specialized IRS processing areas dedicated to assist you. In **Section C** of this form, be sure to include your Social Security Number or Individual Taxpayer Identification Number in the 'Taxpayer Identification Number' field.

Help us avoid delays:

Choose one method of submitting this form either by Mail or by FAX, not both. Please provide clear and readable photocopies. Note that 'tax returns' may not be submitted to either the mailing address or FAX number provided below.

Submitting by Mail	Submitting by FAX
<ul style="list-style-type: none"> • If you checked Box 1 in Section B of Form 14039, are unable to file your tax return electronically because the primary and/or secondary SSN was misused, attach Form 14039 and documentation to your paper tax return and submit to the IRS location where you normally file your tax return. If you have already filed your paper return, submit this Form 14039 and documentation to the IRS location where you normally file. Refer to the 'Where Do You File' section of your return instructions or visit IRS.gov and input the search term 'Where to File'. • If you checked Box 1 in Section B and are submitting this Form 14039 in response to a notice or letter received from the IRS, return this form and documentation with a copy of the notice or letter to the address contained in the notice or letter. • If you checked Box 2 in Section B of Form 14039 (no current tax-related issue), mail this form and documentation to: Internal Revenue Service Fresno, CA 93888-0025 	<ul style="list-style-type: none"> • If you checked Box 1 in Section B of Form 14039 and are submitting this form in response to a notice or letter received from the IRS that shows a reply FAX number, FAX completed Form 14039 and documentation with a copy of the notice or letter to that number. • Include a cover sheet marked 'Confidential'. If no FAX number is shown on the notice or letter, follow the mailing instructions on the notice or letter. • If you checked Box 2 in Section B of Form 14039 (no current tax-related issue), FAX this form and documentation toll-free to: 855-807-5720

Privacy Act and Paperwork Reduction Notice

Our legal authority to request the information is 26 U.S.C. 6001. The primary purpose of the form is to provide a method of reporting identity theft issues to the IRS so that the IRS may document situations where individuals are or may be victims of identity theft. Additional purposes include the use in the determination of proper tax liability and to relieve taxpayer burden. The information may be disclosed only as provided by 26 U.S.C. 6103. Providing the information on this form is voluntary. However, if you do not provide the information it may be more difficult to assist you in resolving your identity theft issue. If you are a potential victim of identity theft and do not provide the required substantiation information, we may not be able to place a marker on your account to assist with future protection. If you are a victim of identity theft and do not provide the required information, it may be difficult for IRS to determine your correct tax liability. If you intentionally provide false information, you may be subject to criminal penalties. You are not required to provide the information requested on a form that is subject to the Paperwork Reduction Act unless the form displays a valid OMB control number. Books or records relating to a form or its instructions must be retained as long as their contents may become material in the administration of any Internal Revenue law. Generally, tax returns and return information are confidential, as required by section 6103. Public reporting burden for this collection of information is estimated to average 15 minutes per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. If you have comments concerning the accuracy of these time estimates or suggestions for making this form simpler, we would be happy to hear from you. You can write to the Internal Revenue Service, Tax Products Coordinating Committee, SE:W:CAR:MP:T:T:SP, 1111 Constitution Ave. NW, IR-6526, Washington, DC 20224. Do not send this form to this address. Instead, see the form for filing instructions. Notwithstanding any other provision of the law, no person is required to respond to, nor shall any person be subject to a penalty for failure to comply with, a collection of information subject to the requirements of the Paperwork Reduction Act, unless that collection of information displays a currently valid OMB Control Number.



Office of Privacy Protection

Safeguarding Information for Your Future

Identity Theft

1. How do we contact you? Please complete form using ink. (Wis. Stats. §§ 93.06, 100.20)

Name: (Mr. Mrs. Miss Ms.) _____
(circle one) (first) (middle) (last)

Phone: Home () _____ Work () _____ ext. _____ Cell () _____

Contact me between 8:00 A.M. and 4:00 P.M. at: (circle one) Home Work Cell Email: _____

Address: _____ Apt.# _____ PO Box: _____

City: _____ State: _____ Zip: _____ County: _____

Social Security Number: (optional) _____ Date of Birth: (MM/DD/YYYY) _____ Age: _____

Information about your complaint

2. ID Theft occurs when someone uses your name and/or other identifying information for their personal gain. Please check the types of ID theft you were a victim of: (check all that apply)

Credit Cards or Debit Cards Phone or Utilities Government Documents or Benefits

Checking or Savings Accounts Securities or Other Investments Other: _____

Loans Internet or E-mail

3. Did suspect use the Internet to open the account or purchase the goods or services: (circle one) No Yes Unknown

4. Were your accounts taken over to fraudulently obtain goods or services: (circle one) No Yes Unknown

5. Was your personal information used to obtain new accounts or services in your name: (circle one) No Yes Unknown

Details of the Identity Theft

6. When did you notice that you might be a victim of identity theft? (MM/DD/YY) _____

7. When did identity theft first occur? (i.e., when was first account opened?) (MM/DD/YY) _____

8. How many accounts were opened or accessed? (credit cards, loans, bank accounts, cellular phone accounts, etc.) _____

9. How much money, if any, have you had to pay as a result of the theft? \$ _____

10. How much money, if any, did the identity thief obtain from companies in your name? \$ _____

11. How much loss, if any, have you recovered prior to filing your complaint? \$ _____

12. What other problems, if any, have you experienced as a result of the identity theft? (check all that apply)

No other harm suffered

Civil suit filed or Judgment entered against you

Criminal investigation, Arrest or Conviction

Denied credit or other financial services

Denied employment or loss of job

Harassed by debt collector or creditor

Time lost to resolve problems: (specify amount) _____

Reputation harm

Other: _____

13. How did the thief obtain your personal information?

Data Breach Family member Mail Theft Lost wallet/purse Internet or E-mail

Robbery Phishing Unknown Other: _____

14. The Identity Thief

Please provide any information you may have about the identity thief, including his or her name, and any addresses or phone numbers the identity thief may have used.

Name: (Mr. Mrs. Miss Ms.) _____
(circle one) (first) (middle) (last)

Phone Number: () _____ (circle type, if known) Home Work Cell

Address: _____ Apt.# _____ PO Box: _____

City: _____ State: _____ Zip: _____ County: _____

E-mail Address: _____ Relationship to the identity thief: _____

15. Contacts

Please indicate which of the following steps, if any, you have already taken to deal with the identity theft.

For which of the following credit bureaus, have you: (check all that apply)

	Equifax	Experian	Trans Union	Other	None
Called to report the fraud?					
Put a "fraud alert" or "freeze" on your report?					
Ordered your credit report?					
Problem with Credit Bureau?					

Have you filed this complaint with another agency? (circle one) No Yes Agency name: _____

What happened? _____

Have you contacted the police? (circle one) No Yes

If yes, please provide the following information: Date: (MM/DD/YYYY) _____ Time: _____

Police department name: _____ Name of Investigating Officer: _____

Address: _____

City: _____ State: _____ Zip: _____ County: _____

Phone Number: () _____ Police Report Number: (if know) _____

16. Problems with businesses

Do you have any problems with the businesses, credit bureaus, or organizations you are dealing with concerning your identity theft problems? If so, identify each business, credit bureau, or organization, provide its location and/or telephone number, if you have it, and tell us briefly what the problem is. **NOTE:** if you checked the problem box for any of the three credit bureaus in the section above, please include those credit bureaus here.

COMPANY 1

Name of business: _____

Address: _____ Ste.# _____ PO Box: _____

City: _____ State: _____ Zip: _____ County: _____

Phone: () _____ Name of person you talked to: _____ Title: _____

Did you contact the business about your complaint? (circle one) No Yes If yes, date? _____

What happened? _____

Have you sent written notifications to this business? (circle one) No Yes If yes, date? _____

What happened? _____

COMPANY 2

Name of business: _____

Address: _____ Ste.# _____ PO Box: _____

City: _____ State: _____ Zip: _____ County: _____

Phone: () _____ Name of person you talked to: _____ Title: _____

Did you contact the business about your complaint? (circle one) No Yes If yes, date? _____

What happened? _____

Have you sent written notifications to this business? (circle one) No Yes If yes, date? _____

What happened? _____

COMPANY 3

Name of business: _____

Address: _____ Ste.# _____ PO Box: _____

City: _____ State: _____ Zip: _____ County: _____

Phone: () _____ Name of person you talked to: _____ Title: _____

Did you contact the business about your complaint? (circle one) No Yes If yes, date? _____

What happened? _____

Have you sent written notifications to this business? (circle one) No Yes If yes, date? _____

What happened? _____

COMPANY 4

Name of business: _____

Address: _____ Ste.# _____ PO Box: _____

City: _____ State: _____ Zip: _____ County: _____

Phone: () _____ Name of person you talked to: _____ Title: _____

Did you contact the business about your complaint? (circle one) No Yes If yes, date? _____

What happened? _____

Have you sent written notifications to this business? (circle one) No Yes If yes, date? _____

What happened? _____

17. Describe your complaint in detail

Please give us information about the identity theft, including, but not limited to, how the theft occurred, who may be responsible for the theft, and what actions you have taken since the theft. Please include a list of companies where fraudulent accounts were established or your current accounts were affected. Please attach additional pages as needed.

AUTHORIZATION FOR RELEASE OF INFORMATION

I authorize and direct you to release any and all records in your possession that contain information related to my identity, as requested by the Wisconsin Office of Privacy Protection. Copies of records shall be sent to the Wisconsin Office of Privacy Protection, PO Box 8911, Madison, Wisconsin 53708-8911.

The Wisconsin Office of Privacy Protection and other cooperating law enforcement agencies will use this information to investigate my complaint of Identity Theft.

I understand that, as a victim of Identity Theft, I am entitled to obtain copies of records that contain information related to the fraudulent use of my identity and to direct that copies of these records be sent to any federal, state, or local law enforcement agency I specify, in accordance with the federal Fair Credit Reporting Act (FCRA, 15 U.S.C. 1681 et seq.).

A copy of this authorization shall be as valid as the original. This authorization shall be valid for a period of one year from the date it is signed.

Signed _____ Dated _____

Print Name _____

Print Address _____

Non-Consent Form

This form must be notarized.

Print Complainant's Name: _____
(First) (Middle) (Last)

Complainant's Gender: Male Female

Complainant's Date of Birth: _____

Complainant's Address: _____

Complainant's Telephone: _____

I, the above-listed complainant, did not give consent for anyone to use personal identifying information or documents belonging, assigned, or otherwise associated with me, or any person under my legal guardianship:

- A) to obtain credit, money, goods, services, employment, or any other thing of value or benefit;
- B) to avoid civil or criminal process or penalty;
- C) to harm my or any person under my legal guardianship's reputation, property, person, or estate.

Complainant's Signature: _____ Date: _____

Notary Information Below:

Subscribed and sworn to before me

This _____ day of _____, _____.

_____ My commission expires: _____

Free credit reports

The Federal Fair Credit Reporting Act (FCRA) is enforced by the Federal Trade Commission (FTC) and requires each nationwide consumer reporting company to provide you with a free copy of your credit report, at your request, once every 12 months. The FCRA also promotes the accuracy and privacy of information in the files of the nation's consumer reporting companies.

A credit report contains information on where you live, how you pay your bills, and whether you have been sued, arrested, or filed for bankruptcy. Consumer reporting companies sell the information in your report to creditors, insurers, employers, and other businesses that use it to evaluate your applications for credit, insurance, employment, or renting a home. The three nationwide consumer reporting companies are Equifax, Experian, and TransUnion.

Most frequently asked questions and the answers about free credit reports:

Q: How do I order my free reports?

A: There are only three authorized ways to order – on line at www.annualcreditreport.com, by calling 877-322-8228, or by completing the Annual Credit Report Request Form (forms can be printed from www.ftc.gov/credit). Do not contact the companies individually for your free credit report.

You may order your reports from one, two or all three nationwide consumer reporting companies at the same time. The law allows you to order one free copy from each of the nationwide consumer reporting companies every 12 months.

A warning about other websites – Only one website is authorized to fill orders for the free annual credit report you are entitled to under the law – annualcreditreport.com. Other websites claim that they offer “free credit reports,” “free credit scores,” or “free credit monitoring” are not part of the legally mandated free annual credit report program. In some cases, the “free” product comes with strings attached. For example, some sites sign you up for a “free” service that converts to one you have to pay for after a trial period. If you do not cancel during the trial period, you may be agreeing to let the company start charging fees to your credit card.

Some of these websites use terms like “free report” in their names; others have addresses that purposely misspell annualcreditreport.com in hope that you mistype the name of the official site; still others advertise so that they appear first in search engines when a person searches for the official site. Some of these sites direct you to other sites that try to sell you something or collect your personal information.

Annualcreditreport.com and the nationwide consumer reporting companies will not send you an email asking for your personal information. If you get an email, see a pop-up, or get a phone call

from someone claiming to be from annualcreditreport.com or any of the three nationwide credit reporting companies, do not reply or click on any link in the message. It is probably a scam.

Q: What information do I have to provide to get my free report?

A: You will need to provide your name, address, Social Security number, and date of birth. If you have moved in the last two years, you may have to provide your previous address. To maintain the security of your file, each nationwide consumer reporting company may ask you for information that only you would know, like the amount of your monthly mortgage payment. Each company may ask you for different questions because the information each has in your file may come from different sources. Requests for further information will be made by mail and not by email or telephone.

If you get an email or see a pop-up ad claiming it is from www.annualcreditreport.com or any of the three nationwide consumer reporting companies, do not reply or click on any link in the message – it is probably a scam. Forward any email that claims to be from www.annualcreditreport.com or any of three consumer reporting companies to the FTC’s database of deceptive spam at spam@uce.gov.

Q: Why would I want to get a copy of my credit report?

A: You may want to review your credit report:

- to make sure the information is accurate, complete, and up-to-date.
- because the information it contains may affect your applications and/or costs for loans, credit, insurance, employment, or renting a home.
- to help guard against identity theft. Identity theft is when someone uses your personal information – like your name, your Social Security number, or your credit card number – to commit fraud. Identity thieves may use your information to open a new credit card account in your name. When they do not pay the bills the delinquent account is reported on your credit report. Inaccurate information like that could affect your ability to get credit, insurance, or even a job.

Q: How long does it take to get my report after I order it?

A: You should be able to access online requests immediately. When ordered by calling toll-free 1-877-322-8228, your report will be mailed within 15 days. When mailing in the Annual Credit Report Request Form, your report will be mailed to you within 15 days of receipt.

It may take longer to receive your report if the nationwide consumer reporting company requests more information to verify your identity before processing.

There may be times when the nationwide consumer reporting companies receive an extraordinary volume of requests. If that happens, you may be asked to resubmit your request or be told that your report will be mailed sometime after 15 days from your request. The nationwide consumer reporting companies will inform you when delays occur.

Q: Are there any other situations where I might be eligible for a free report?

A: Under federal law, you are entitled to a free report if a company takes adverse action against you, such as denying your application for credit, insurance, or employment, and you ask for your report within 60 days of receiving notice of the action. The notice will give you the name, address, and phone number of the consumer reporting company. You are also entitled to one free report a year if you are unemployed and plan to look for a job within 60 days; if you are on welfare; or if your report is inaccurate because of fraud, including identity theft. Otherwise, a consumer reporting company may charge you for another copy of your report within a 12-month period.

Q: Can I purchase additional credit report copies?

A: Yes, by contacting each reporting company:

Equifax Information Services LLC
PO Box 740241
Atlanta, GA 30374
800-685-1111
www.equifax.com

Experian Info Solutions Inc
PO Box 2002
Allen, TX 75013-0036
888-EXPERIAN
(888-397-3742)
www.experian.com

TransUnion LLC
2 Baldwin Place
PO Box 1000
Chester, PA 19022
800-888-4213
www.transunion.com

Q: Should I order a report from each of the three nationwide consumer reporting companies?

A: It is up to you. Because nationwide consumer reporting companies get their information from different sources, the information in your report from one company may not reflect all, or the same, information in your reports from the other two companies. That is not to say that the information in any of your reports is necessarily inaccurate; it just may be different.

Q: Should I order my reports from all three of the nationwide consumer reporting companies at the same time?

A: You may order one, two, or all three reports at the same time, or you may stagger your requests. It is your choice. Some financial advisors say staggering your requests during a 12-month period may be a good way to keep an eye on the accuracy and completeness of the information in your reports.

Q: What if I find errors – either inaccuracies or incomplete information – in my credit report?

A: Under the Fair Credit Reporting Act, both the consumer reporting company and the information provider (that is, the person, company, or organization that provides information about you to a consumer reporting company) are responsible for correcting inaccurate or incomplete information in your report. To take advantage of all your rights under this law, contact the consumer reporting company and the information provider.

1. Tell the consumer reporting company, in writing, what information you think is inaccurate.

Consumer reporting companies must investigate the items in question – usually within 30 days – unless they consider your dispute frivolous. They also must forward all the relevant data you provide about the inaccuracy to the organization that provided the information. After the information provider receives notice of a dispute from the consumer reporting company, it must investigate, review the relevant information, and report the results back to the consumer reporting company. If the information provider finds the disputed information is inaccurate, it must notify all three nationwide consumer reporting companies so they can correct the information in your file.

When the investigation is complete, the consumer reporting company must give you the written results and a free copy of your report if the dispute results in a change. (This free report does not count as your annual free report.) If an item is changed or deleted, the consumer reporting company cannot put the disputed information back in your file unless the information provider verifies that it is accurate and complete. The consumer reporting company also must send you written notice that includes the name, address, and phone number of the information provider.

2. Tell the creditor or other information provider in writing that you dispute an item. Many providers specify an address for disputes. If the provider reports the item to a consumer reporting company, it must include a notice of your dispute. And if you are correct – that is, if the information is found to be inaccurate – the information provider may not report it again.

Q: What can I do if the consumer reporting company or information provider will not correct the information I dispute?

A: If an investigation does not resolve your dispute with the consumer reporting company, you can ask that a statement of the dispute be included in your file and in future reports. You also can ask the consumer reporting company to provide your statement to anyone who received a copy of your report in the recent past. You can expect to pay a fee for this service.

If you tell the information provider that you dispute an item, a notice of your dispute must be included any time the information provider reports the item to a consumer reporting company.

Q: How long can a consumer reporting company report negative information?

A: A consumer reporting company can report most accurate negative information for seven years and bankruptcy information for ten years. There is no time limit on reporting information about criminal convictions; information reported in response to your application for a job that pays more than \$75,000 a year; and information reported because you have applied for more than \$150,000 worth of credit or life insurance. Information about a lawsuit or an unpaid judgment against you can be reported for seven years or until the statute of limitations runs out, whichever is longer.

Q: Who else can get a copy of my credit report?

A: The Fair Credit Reporting Act specifies who can access your credit report. Creditors, insurers, employers, and other businesses that use the information in your report to evaluate your applications for credit, insurance, employment, or renting a home are among those that have a legal right to access your report.

Q: Can my employer get my credit report?

A: An employer can get a copy of your credit report only if you agree. A consumer reporting company cannot provide information about you to your employer, or to a prospective employer, without your written consent.

For more information or to file a complaint, visit or contact the:

**Federal Trade Commission
Bureau of Consumer Protection
Consumer Response Center
600 Pennsylvania Avenue NW
Washington DC 20580**

WEBSITE: www.ftc.gov

**Toll-free: (877) FTC-HELP
(877) 382-4357**

**Bureau of Consumer Protection
Office of Privacy Protection
2811 Agriculture Drive
PO Box 8911
Madison WI 53708-8911**

E-MAIL: DATCPHotline@wi.gov

WEBSITE: datcp.wi.gov

Toll-free in WI: (800) 422-7128

(608) 224-5163 FAX: (608) 224-4677

TTY: (608) 224-5058

(Information taken from Federal Trade Commission website "Free Credit Reports"
<http://www.consumer.ftc.gov/articles/0155-free-credit-reports>)

What is personal information?

Any combination of the following information can be enough for identity theft to occur:

- Name
- Address
- Phone Number
- Email Address
- ATM Pin
- Date of Birth
- Social Security Number
- Mother's Maiden Name
- Financial Account Numbers

The basics of safeguarding your information

• Guard your social security number

Do not carry your Social Security card with you and do not ever use your social security number as a PIN or password. Limit the number of identification cards you carry. Many medical cards contain your Social Security number. Do not carry it with you if you do not need it.

• Shred, shred, shred

Shred bills, bank statements, receipts, medical billings, credit card offers, and any other items that contain personal or financial information.

• Protect your mail

If you are going to be out of town have the post office hold your mail. Place outgoing mail in an official mailbox not your own.

• Never give out your personal information

Legitimate companies or agencies do not call or email asking for personal information. Never give out personal information unless you initiated the contact.

• Sign up for the Do Not Call Registry

Register your home and mobile residential numbers on the Wisconsin Do Not Call Registry at no cost by visiting www.donotcall.gov or by calling 1-888-382-1222; you must call from the phone number you wish to register.

• Keep a list of all financial accounts

Keep a list of all credit card and bank account numbers, phone numbers, and expiration dates. This information as well as other sensitive documents should be kept in a safe place, such as a safe.

• Stop pre-approved credit card offers

Stop pre-approved credit card offers by calling 1-888-567-8688 or visiting the Opt Out website at www.optoutprescreen.com

• Check your bills and bank statements

Look at your statements as soon as you get them to see if there are any unauthorized charges or inaccuracies. If there are, report them right away.

• Pay attention to internet security

Make certain you have a firewall and updated virus and spyware protection on your computer. Check your browser security settings to make certain that they are not too low.

• Use two-factor authentication if offered

Two-factor authentication is an added layer of security that combines something you have, a physical token such as a card or a code, with something you know, something memorized such as a personal identification number (PIN) or password.

• Check your credit report regularly

Obtain your credit report FREE from each of the three major credit reporting agencies each year. You can get your free credit report from Equifax, Experian, and TransUnion by calling 1-877-322-8228 or online at www.annualcreditreport.com

What to do if it happens to you

• Contact your bank

Let your bank know that your identity has been stolen even if the thief has not used your bank accounts or ATM/debit card. Consider closing and reopening new accounts with new numbers

and obtaining a new ATM/debit card with a new PIN. In addition, you may want to ask your bank if you can place a password on your accounts.

• Contact your creditors

If an identity thief has opened a new account or credit card in your name contact the creditor to close the account and explain what happened as soon as possible.

• Report the theft to the police

Your local police department is required to prepare a report of identity theft even if the theft might have occurred at some other place. Be sure to obtain a copy of the report for yourself. It can be a vital tool to working through recovering from the identity theft.

• Put a Fraud Alert on your credit report

A fraud alert is a notation that requires a business to take extra reasonable steps to verify a person's identity before issuing a line of credit or offering services. The fraud alert will be active for 90 days and can be renewed. You only need to contact one of the three agencies below and they will notify the other two on your behalf.

• Put a Security Freeze on your credit report

A freeze is stronger than a fraud alert because it remains in place until you release it and requires that you be alerted if an account in your name is requested. The freeze must be requested by contacting each of the three credit reporting agencies directly. Unless a police report is provided, the fee is \$10 for each agency. You will be given a pin number to temporarily lift the freeze in order for you or a creditor to access your credit report. There may be a \$10 fee each time you need to lift the freeze.

Experian

PO Box 9701
Allen, TX 75013
1-888-397-3742
www.experian.com

Equifax

PO Box 105069
Atlanta, GA 30348
1-800-349-9960
www.equifax.com

TransUnion
PO Box 2000
Chester, PA 19022
1-888-909-8872
www.transunion.com

- **File an identity theft complaint with the Office of Privacy Protection (OPP)**

We can help you take the steps you need to resolve problems caused by identity theft. You can file an identity theft complaint by calling and requesting a complaint form at 1-800-422-7128 or obtain one online at www.privacy.wi.gov

- **Contact the Division of Motor Vehicles if your driver's license or ID card is stolen**

WI Department of Transportation
PO Box 7999
Madison, WI 53707
(608) 264-7049
www.dot.wisconsin.gov

You can also ask the DMV to place a notation on your driver record so that DMV and law enforcement will require additional identification documents when you conduct business with them. It will require anyone (including you) attempting to use your identity to provide the following items:

1. Certified birth certificate, passport or other acceptable proof of name and date of birth.
2. Two forms of identification listing your name with either your photograph or signature.

- **Contact the Postal Inspector if your mail was stolen or if an identity thief used a false address**

Contact the nearest Postal Inspector by calling the Postal Service at 1-877-876-2455. You can also file a mail theft complaint online at www.postalinspectors.uspis.gov/

- **If a debt collector contacts you**

If a debt collector calls, explain that you are the victim of identity theft and that the bill they are trying to collect is fraudulent. Ask for the steps

that need to be taken and any forms you need to fill out to prove that.

- **If you are accused of a crime committed in your name**

Contact the arresting or citing law enforcement agency to inform them of the situation. You may be required to file a petition with the court to request and prove your innocence. Once law enforcement or a judge conclude that you were not the person who committed the crime, you will be given a Certificate of Clearance that you will need to keep with you at all times.

In some cases, criminal identify theft may best be handled by contacting a private attorney to assist with working through the legal process. The Statewide Lawyer Referral Services Hotline can help you find affordable representation in your area. They can be reached at 1-800-362-9082.

For more information or to file a complaint, visit our website or contact the Office of Privacy Protection:

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WEBSITE: www.privacy.wi.gov

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(608) 224-5163

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WISCONSIN

Office of Privacy Protection



Safeguarding Information for Your Future

Fact Sheet

Identity Theft Consumer Tips



Credit report security freeze

Wisconsin consumers have the right to place a security freeze on their credit reports. Parents and legal guardians can also place a security freeze on the credit report of a child or other protected individual. A security freeze can help protect from identity theft. A security freeze will prohibit the release of any information on the credit report without express authorization, except to those with whom you have an existing account or a collection agency acting on behalf of the existing account, for the purposes of reviewing or collecting the account. A security freeze is designed to prevent an extension of credit, such as a loan or a new credit card, from being approved without consent.

What are the fees?

	Placing a Freeze	Temporary Lift	Freeze Removal
Identity Theft Victim:	FREE	FREE	FREE
Non-Victim:	\$10.00	\$10.00	FREE

For your convenience, there is a sample form letter attached to request a security freeze. If you are a victim of identity theft, include a copy of the police report in order for the fees to be waived. Please note, correspondence will not be returned. Remember to send copies and always retain your original documents. A separate letter is required for each credit reporting agency.

Experian
 PO Box 9554
 Allen, TX 75013
 1-888-397-3742

www.experian.com/freeze

Equifax
 PO Box 105788
 Atlanta, GA 30348
 1-800-349-9960

www.freeze.equifax.com

TransUnion
 PO Box 2000
 Chester, PA 19022
 1-888-909-8872

www.transunion.com/securityfreeze

Written confirmation of the security freeze will be sent to you within 10 business days of receipt of the request. It will include a personal identification number (PIN), and instructions for removing the security freeze or authorizing the release of your credit report for a specific period of time.

Removing or temporarily lifting the freeze from your credit report:

When you request a security freeze for your credit report, you will be provided a personal identification number (PIN) to use if you choose to remove the security freeze or authorize the release of your credit report for a specific period of time. Be sure to keep your personal identification number (PIN) in a secure place for use when needed. To remove your freeze either permanently or temporarily, you must contact the credit reporting agency and provide all of the following:

- The personal identification number (PIN).
- Proper identification with a current address to verify your identity.
- The period of time for which the report shall be made available.

- Payment of the appropriate fee.

What is the difference between a fraud alert and a freeze?

A fraud alert is a special message on a credit file that states the consumer is or may be a potential identity theft victim. It requires businesses to take extra reasonable steps to verify the identity of the applicant before issuing the line of credit or service. A fraud alert can also slow down your ability to get new credit. It should not stop you from using your existing credit cards or other accounts.

How long does it take for a security freeze to be in effect?

Credit reporting agencies must place the freeze no later than five business days after receiving your written request.

How long does it take for a security freeze to be lifted?

Credit reporting agencies must lift a freeze no later than three business days after receiving your request.

Can I open new credit accounts if my files are frozen?

Yes. If you want to open a new credit account or get a new loan, you can lift the freeze on your credit file. After you request a freeze, each of the credit reporting agencies will send you a Personal Identification Number (PIN). You will also get instructions on how to lift the freeze. A lift period can be a minimum of three days or a maximum of 30 days. You can lift the freeze by phone or online, using the PIN. The credit reporting agencies must lift your freeze within three days of your request.

What will a creditor who requests my file see if it is frozen?

A creditor will see a message or a code indicating that the file is frozen.

Can a creditor get my credit score if my file is frozen?

No. A creditor who requests your file from one of the three credit reporting agencies will only get a message or a code indicating that the file is frozen.

Can I order my own credit report if my file is frozen?

Yes.

Can anyone see my credit file if it is frozen?

When you have a security freeze on your credit file, certain entities still have access to it. Your report can still be released to your existing creditors or to collection agencies acting on their behalf. They can use it to review or collect on your account. Other creditors may also use your information to make offers of credit-unless you opt out of receiving such offers. Government agencies may have access for collecting child support payments or taxes or for investigating Medicare fraud. Government agencies may also have access in response to a court or administrative order, a subpoena, or a search warrant.

Do I have to freeze my file with all three credit reporting agencies?

Yes. Different credit issuers may use different credit reporting agencies. If you want to stop your credit file from being viewed, you need to freeze it with Equifax, Experian and TransUnion.

Will a freeze lower my credit score?

No.

Can an employer do a background check on me if I have a freeze on my credit file?

No. You would have to lift the freeze to allow a background check or to apply for insurance, just as you would to apply for credit.

Does freezing my file mean that I will not receive pre-approved credit offers?

No. You can stop pre-approved credit offers by calling 888-5OPTOUT (888-567-8688). You can also do this online at www.optoutprescreen.com. This will stop most of the offers that go through the credit reporting agencies. You have the option to opt-out for 5 years or permanently.

Can I request a temporary lift with only one credit reporting agency?

Yes. You can determine what credit reporting agency your new creditor uses and request a lift from that agency only. The desired credit reporting agency can assign a unique PIN number for the temporary lift. You will be required to provide the PIN assigned to the creditor during the temporary lift period. A lift period can be a minimum of three days or a maximum of 30 days. This method will provide added protection, as the creditor is the only one that will have access to your credit report.

Why when placing a freeze on my credit report would a credit reporting agency require me to photocopy my Social Security Card and/or Driver's License and fax or mail it to them?

The credit reporting agency is attempting to collect your information for the purpose of updating your credit report and authenticating your identity. Make sure all of your important documents, such as your Driver's License have been updated with the most current information.

Wisconsin's Child Protection Act:

Under Wisconsin's Child Credit Protection Act, a parent or legal guardian may freeze the credit record of a child or protected individual.

If your child already has a credit report in their name, one of three things has happened. You have applied for credit in their names and applications were approved. You have added them as authorized users or joint accounts holders on one or more of your accounts. Or, someone has fraudulently used their information to apply for credit and the child is already an identity theft victim.

If you suspect your child may be the victim of identity theft, first contact the credit reporting agencies directly and request they do a **manual search** using only the child's social security number. If a file is found, you will be able to obtain a copy to review it for inaccurate or fraudulent information. The credit reporting agencies may require the child's complete name, address, date of birth and a copy of their social security card or birth certificate. As a parent or legal guardian you may also be required to send proof of your identity, guardianship or Power of Attorney.

For more information or to file a complaint, visit our website or contact the Office of Privacy Protection.

**Bureau of Consumer Protection
Office of Privacy Protection
2811 Agriculture Drive
PO Box 8911
Madison WI 53708-8911**

E-MAIL: DATCPWisconsinPrivacy@wi.gov

**WEBSITE: privacy.wi.gov
Toll-free in WI: (800) 422-7128
(608) 224-5163
FAX: (608) 224-4677
TTY: (608) 224-5058**

ADULT letter requesting security freeze – MINOR requesting letter is on reverse

Date: _____

Dear Experian / TransUnion / Equifax: **(circle one – a separate letter must be sent to each agency)**

I would like to place a security freeze on my credit file.

My name is: _____
(first) (middle initial) (last)

My current address is: _____

My last former address was: _____

My Social Security number is: _____

My date of birth is: _____

As proof of identity and residence, I am enclosing **copies of all of the following:**

- My Social Security card or certified official copy of my birth certificate.
- My government issued photo ID (driver's license, passport, state or military issued ID card).
- A recent utility bill, bank statement or insurance bill that reflects my current address.

CHECK ONE:

- I am an identity theft victim and a copy of the police report is enclosed.
- I am **not** an identity theft victim. I am enclosing a \$10.00 check made payable directly to Experian / TransUnion / Equifax **(circle one)**.

(Your signature)

Wisconsin residents may use this form to request a security freeze with Experian, TransUnion or Equifax. Completed forms should be sent certified mail directly to each credit reporting agency. Contact your local US Post Office with certified mail questions. The credit reporting agencies may contact you in writing, regarding errors, incomplete information or a need for further submissions. This form is provided by the Wisconsin Department of Agriculture, Trade and Consumer Protection – Office of Privacy Protection.

MINOR letter requesting security freeze – ADULT requesting letter is on reverse

Date: _____

Dear Experian / TransUnion / Equifax: **(circle one – a separate letter must be sent to each agency)**

I would like to place a security freeze on a minor's credit file.

My name is: _____
(first) (middle initial) (last)

My current address is: _____

My last former address was: _____

My Social Security number is: _____

My date of birth is: _____

The minor's name is: _____
(first) (middle initial) (last)

The minor's address is: _____

The minor's last former address was: _____

The minor's Social Security number is: _____

The minor's date of birth is: _____

As proof of identity and residence, I am enclosing **copies of all of the following:**

- My Social Security card or certified official copy of my birth certificate.
- The minor's Social Security card.
- A certified copy of the minor's birth certificate.
- My government issued photo ID (driver's license, passport, state or military issued ID card).
- A recent utility bill, bank statement or insurance bill that reflects my current address.
- A court order or written notarized statement that the minor is under guardianship or Power of Attorney (if applicable).

CHECK ONE:

- The minor is an identity theft victim and a copy of the police report is enclosed.
- The minor is **not** an identity theft victim. I am enclosing a \$10.00 check made payable directly to Experian / TransUnion / Equifax **(circle one)**.

(Your signature)