

FRAUD SUPPLEMENT

This FRAUD SUPPLEMENT must accompany all reports for fraud-related offenses such as credit/debit card abuse, check forgery, and identity theft. The supplement <u>must</u> be completed and submitted in accordance with these instructions for the case to move forward. If no supplement is received or if an incomplete supplement is submitted the case will be suspended, and no investigative action will be taken. As a result, it is critical for victims to read and follow these instructions in their entirety. Additionally, due to limited retention periods for certain types of evidence, it is important that victims submit their supplements as soon as possible.

The College Station Police Department can only investigate fraud offenses that occur in College Station or whose victim resides in College Station. Offenses that occur in other jurisdictions must be reported to those jurisdictions. For example, offenses that occur in the city of Bryan or in unincorporated Brazos County must be reported to the Bryan Police Department or the Brazos County Sheriff's Office.

Once you have confirmed that your offense occurred in the city of College Station, read the instructions below, complete this supplement, and submit it using one of the following methods:

- 1. Email to: PD-CID-PAS@cstx.gov
- 2. Mail to: College Station Police Department
 Attn: Criminal Investigations/Fraud
 800 Krenek Tap Road

College Station, TX 77840

3. Deliver in person to CSPD headquarters at the address above

If you have any questions about this supplement, contact the CSPD Fraud Investigation Police Assistant at (979) 764-2508.

REQUIRED ITEMS (Only complete items involved in your	r case; check each item that you complete from the list below)
☐ Victim Biography	☐ Check Forgery/Unauthorized ACH Worksheet
☐ Victim Statement	☐ Identity Theft Worksheet Account Statement
☐ Information Release	Attachments
Credit/Debit Card Abuse Worksheet	
Victim signature, date, and time turned in:	
CSPD USE ONLY:	
Received on date: Time:	Received by:
CSPD Employee ID number:	CSPD CASE NUMBER:



INSTRUCTIONS

- 1) Complete the VICTIM BIOGRAPHY in its entirety, including your complete Social Security number. Your personal and financial information is critical to the investigation and will not be released without permission.
- 2) Complete and sign the VICTIM STATEMENT by describing in detail what occurred. Even if you have already given your story to CSPD, it is important for investigators to have a detailed account in writing of what happened. Your statement must be legible. Typewritten statements are preferred.
- 3) Complete and sign the RELEASE OF INFORMATION form. This will give investigators the ability to obtain evidence on your behalf.
- 4) If your case involves the unauthorized use of credit or debit card accounts, contact your financial institution(s) to obtain copies of all account statements showing the fraudulent charges. Make sure the statements include your name, account number, and dates of the fraudulent transactions. You will also need to ask your financial institution(s) for the dates and times of the actual transactions, as opposed to the "posted" dates and times. Without actual dates and times, investigators may be unable to obtain key items of evidence. Once you have these documents, attach them to this packet.
 - Next, use the information obtained from your financial institution(s) to complete the CREDIT/DEBIT CARD ABUSE WORKSHEET. If more than one credit/debit card account was used, list each separately. Understand that it is critical for you to include the FULL card number(s) and FULL account number(s). If for whatever reason you no longer have access to these, obtain them from your financial institution(s) prior to submitting this supplement.
- 5) If your case involves check forgery, contact your financial institution(s) to obtain copies of all account statements showing any transactions involving the forged checks. Make sure these statements include your name, full account number, and clear images of the forged checks. Additionally, copies of checks you have previously written from this account can be helpful in assisting investigators with handwriting comparisons. If possible, you are encouraged to attach some examples to this supplement, along with the bank statements.
 - Next, using the information obtained from your financial institution(s), complete the CHECK FORGERY WORKSHEET.
- 6) If your case involves identity theft, contact the entities or online platforms involved to obtain as much information as possible about the fraudulent accounts opened/accessed with you personal identifying information. Then use this information to complete the IDENTITY THEFT WORKSHEET.
- 7) Once you have completed the supplement, submit it to the College Station Police Department using one of the three methods listed on page 1.

ADDITIONAL INFORMATION

In addition to filing this report, CSPD recommends you take the following steps:

- File a report with all financial institutions involved including banks, credit card companies, online retailers, etc. This will alert them to the activity and may result in the reversal of fraudulent charges.
- · Check your credit report at AnnualCreditReport.com or by calling (877) 322-8228. This is free of charge and will allow you to identify any unauthorized accounts or suspicious activity involving your personal information. Also consider placing a fraud alert on your credit report through each of the three major credit bureaus (Equifax, Experian, and TransUnion) to prevent future fraud.
- · Victims of internet crime should file a report with the Federal Bureau of Investigation Internet Crime Complaint Center at www.IC3.gov.
- · Victims of identity theft should file a report with the Federal Trade Commission at www.IdentityTheft.gov.
- · Victims of tax-related fraud should review the IRS Taxpayer Guide to Identity Theft at www.IRS.gov.



	VICTIM BIOC	GRAPHY	
Name: Last, First, Middle		CSPD Case #:	Date:
Race/Gender:	Date of Birth:	DL #/State:	
Address w/ City, State & Zip)		
Social Security:	Main Phone:	Secondary Phone:	
		Email:	
Work Phone:	Employer:	Eman.	
	VICTIM STAT Please provide as much detail as po	TEMENT ossible about what occurred.	



RELEASE OF PERSONAL/FINANCIAL INFORMATION

Date:		
To Whom It May Concern,		
Ι,	, have filed an official police report with the College Station	Police Department
Case Number	·	
investigation directly to the Coll information can include, any/all	ation, I agree to release all personal and financial information relates Station Police Department – Criminal Investigations Division. Ecount numbers, credit/debit card numbers, transaction dates and the eceipts, fraud affidavits, original or copies of checks, shipping information, in the context of the c	That times,
I authorize direct contact with yo	r company/entity by the College Station Police – Criminal Invest	igations
Division, about my case.		
Signature	Print Name	
Witness Signature	Witness Print Name	



Complete this CREDIT/DEBIT CARD ABUSE WORKSHEET, if applicable. Fill out one section for each card or account that was abused.			
(1) Bank Name:	Complete Card #:		
Card type: (Visa, Mastercard, etc.)	Credit	☐ Debit	
If debit transaction, how do you think the PIN was obtained?	,		
(2) Bank Name:	Complete Card #:		
Card type: (Visa, Mastercard, etc.)	☐ Credit	☐ Debit	
If debit transaction, how do you think the PIN was obtained?			
(3) Bank Name:	Complete Card #:		
Card type: (Visa, Mastercard, etc.)	Credit	☐ Debit	
If debit transaction, how do you think the PIN was obtained?			
(4) Bank Name:	Complete Card #:		
Card type: (Visa, Mastercard, etc.)	☐ Credit	☐ Debit	
If debit transaction, how do you think the PIN was obtained?			
TRANSACTION INFORMATION Important: There are two dates and times associated with most transactions. One is a transaction date/time; this is what would be printed on the actual receipt and documents at time of purchase. The other is the posted date/time; this is when the purchase was verified and "officially" cleared the bank. The posted date/time is also what appears on your bank statement, either printed or electronic. CSPD Investigators need the Transaction date/time and actual address or at least the business location number in order to obtain surveillance video for prosecution. You may have to contact your bank/credit card company to get the transaction dates/times.			
Card ID # from above Transaction Date/Time Address, Sto (I.E. 1,2,3,or 4)	ore Number or Web Address	Amount	



Complete this CHECK FOR	RGERY / UNAUTHORIZED ACH WORK	SHEET, if applicable
Bank Name	Account #	Routing #
Bank Name	Account #	Routing #
Bank Name	Account #	Routing #
Check No: (If Applicable) Transaction Da	ate/Time Address, Store Number o	r Web Address Amount



Complete this **IDENTITY THEFT WORKSHEET**, if applicable.

Name and address (or web address) of location / business where ID theft occurred (Exxon - College Station, is NOT specific enough).
Describe what ID information was used (Name, Address, Social Security #, email, account username, etc.):
Please provide usernames and emails for any accounts accessed or opened using an online platform (i.e. Cash App, PayPal, etc.)
Describe how ID information was used (Example: Opened credit card with Bank of)
Account number or platform username, if applicable: If you have made contact with the company, list the contact person's information and reference number: (Name and Phone)
in you have made confidently, not the confidence person a maximum and reference numbers (realise and r none)
Account #/Username Transaction Date/Time Address, Store #, Web Address, or Online Platform Amount



OVERFLOW TRANSACTION PAGE

Check/Card/Account No.	Transaction Date/Time	Address, Store Number or Web Address	Amount