



# WILLIAMSON COUNTY SHERIFF'S OFFICE

**Jeff Hughes, Sheriff**

408 CENTURY COURT  
FRANKLIN, TENNESSEE 37064

(615) 790-5560



## Fraud / Forgery Report

**Incident Number:** \_\_\_\_\_

This packet is designed for reporting of fraud and forgery crimes through the Williamson County Sheriff's Office. Utilize this form for the following types of crimes.

- Finance Card Fraud - Unauthorized charges on a credit/debit card.
- Forgery - Alteration or creation of false documents or records.
- Identity Theft - Impersonation or use of personal information for fraud.
- Other Fraud - Financial exploitation/extortion or schemes involving deceit or scams.

Fraud investigations are resource intensive, technical, and challenging. In order for the WCSO to effectively investigate fraud crimes it is imperative that this form be filled out completely, accurately, and promptly. An investigation may not be initiated if information is missing. Any delay in reporting will likely result in evidence being lost, such as video footage.

- Only complete this packet if you desire criminal prosecution for the offense.
- Be advised that in the event a suspect is identified and charged, you as a victim may be required to appear and testify in court.

You may complete this report before contacting the Williamson County Sheriff's Office. An incident number will be provided when you turn in the completed packet. When submitting the packet, be sure to include any relevant document such as:

- Account statements.
  - Statements must show **transaction** date and time, and card/account information.
  - Full account numbers for the affected accounts should be included.
- Copies of checks, documents, contracts.
  - Copies must be legible.
- Bills, debt collection notices, or other documents related to identity theft.



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### Section A - Victim Information

Incident #: \_\_\_\_\_

1. Name: \_\_\_\_\_ DOB: \_\_\_\_\_
2. SSN: \_\_\_\_\_ Driver License#/State: \_\_\_\_\_
3. Address: \_\_\_\_\_
4. Phone #: \_\_\_\_\_ Email address: \_\_\_\_\_
5. Check ONLY one:

- I am willing to participate in the investigation and prosecution of the person(s) who committed this crime.
- I am NOT willing to assist in the investigation and prosecution of the persons who committed this crime.

#### 6. Reporting Information

- The crime occurred in Williamson County, Tennessee  YES  NO
- This report was requested by a law enforcement agency in another jurisdiction?:  YES  NO

### Section B - Suspect Information (complete if known)

7. Name: \_\_\_\_\_ DOB/age: \_\_\_\_\_
8. Address: \_\_\_\_\_
9. Phone number(s): \_\_\_\_\_
10. Email address: \_\_\_\_\_
11. Physical Description: \_\_\_\_\_  
\_\_\_\_\_
12. Other Identifiers (Social media names/URL, cash transfer accounts, nicknames/monikers, etc.): \_\_\_\_\_  
\_\_\_\_\_

### **What crime are you reporting? Check all that apply:**

- |   |                |
|---|----------------|
| <input type="checkbox"/> Debit/Credit fraud | *See Section C |
| <input type="checkbox"/> Forgery            | *See Section D |
| <input type="checkbox"/> Identity Theft     | *See Section E |
| <input type="checkbox"/> Other fraud/scams  | *See Section F |



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### Section C - CRIMES INVOLVING CREDIT/DEBIT CARD FRAUD

- 13. Have you reported the fraud to the issuing bank/credit union?  Yes  No
- 14. Do you have your physical debit/credit card in your possession?  Yes  No
- 15. Name of bank/credit union: \_\_\_\_\_
- 16. Phone #: \_\_\_\_\_ Contact Person: \_\_\_\_\_
- 17. Total of financial loss: \_\_\_\_\_ Amount reimbursed: \_\_\_\_\_
- 18. Where was the card lost/stolen/compromised? \_\_\_\_\_

### Card Details

Card ID	Full card number	Name on Card	Issuing Bank/Credit Union
A			
B			
C			

### Transactions

Card ID	Date/Time of Transaction	Address/location of fraud	Amount

19. Include the following **Finance Card Fraud** documents with this report  
Check when complete.

- Copy of account statement with underlined/highlighted fraudulent charges.

**\*\*Must show date/time/amount/location of the fraudulent transaction\*\***

- Detailed witness statement form included with this packet.

**\*\*Must be signed in the presence of a deputy\*\***



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### Section D - CRIMES INVOLVING FORGED DOCUMENTS

20. Location where forged document were presented: \_\_\_\_\_  
 Include copies of **Forged Documents** (photos, prints, or scans) and bank/credit union information as applicable.

#### Events/Documents

Date/Time of Forgery	Type of Forged document/item	Financial Loss	Copy attached
			<input type="checkbox"/>
			<input type="checkbox"/>
			<input type="checkbox"/>

- Detailed witness statement form included with this packet.  
 \*\*Must be signed in the presence of a deputy.

### Section E - CRIMES INVOLVING IDENTITY THEFT

21. Name of bank/credit union/entity: \_\_\_\_\_  
 22. Account Numbers: \_\_\_\_\_  
 23. Bank/credit union/entity address: \_\_\_\_\_  
 24. Phone #: \_\_\_\_\_ E-mail Address: \_\_\_\_\_  
 25. Contact Person: \_\_\_\_\_ Title: \_\_\_\_\_  
 26. Describe the Personal Identifying Information used by the suspect in this incident (i.e. Name, birthday, DL, SSN, photograph, etc.). \_\_\_\_\_  
 \_\_\_\_\_

#### **Event Details**

Date/Time	Personal Info. Used	Location	Loss

27. Include the following **Identity Theft** documents with this report: check when complete/as applicable.
- Copy of account statements, credit reports, loan applications, photographs, or other documents showing evidence of identity theft.  
 Copy of documents, images, or other evidence which could aid in identification of the suspect in this case.  
 Detailed witness statement form included with this packet. \*\*Must be signed in the presence of an officer\*\*.



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## Section F - Other Types of Fraud (extortion/exploitation/etc.)

28. Where did the crime occur? \_\_\_\_\_
29. When did the crime occur (timeframe)? \_\_\_\_\_
30. What evidence are you aware of related to the crime? \_\_\_\_\_
31. What is the total financial loss as a result of the crime? \_\_\_\_\_
32. Briefly describe the nature of the crime \_\_\_\_\_

Attach a detailed witness statement describing the event.

**\*\*Must be signed in the presence of a deputy\*\***

### Additional Information

- The Williamson County Sheriff's Office encourages victims to check their credit report activity to determine if additional fraudulent accounts have been opened with your information. Reports are available from Equifax, Experian, and Transunion through the following website; AnnualCreditReport.com
- Online crimes can also be reported to [www.IC3.gov](http://www.IC3.gov) which is an FBI maintained website.
- Crimes involving Federal Tax information should also be reported to through the IRS website [www.irs.gov](http://www.irs.gov) though the "Identity Theft" link.

Completed packets may be turned in at:

**The Williamson County Sheriff's Office  
408 Century Court  
Franklin, Tennessee 37064**

You may also call the Williamson County Sheriff's Office at **(615) 790-5550** to request a deputy to pick up a completed packet.





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## Release of Personal & Financial Information

Date: \_\_\_\_\_

To Whom it May Concern,

I, \_\_\_\_\_ have filed an official police report with the Williamson County Sheriff's Office. The Incident Number is \_\_\_\_\_

In order to assist with that investigation, I agree to release all personal and financial information related to the investigation directly to the Williamson County Sheriff's Office Criminal Investigations Division. This information may include any/all account numbers, credit/debit card numbers, transaction dates and times, transaction locations, transaction receipts, fraud affidavits, original or copies of checks, shipping information, and surveillance video.

I authorize direct contact with your company/entity by the Williamson County Sheriff's Office Investigations Division, about my case.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Witness Signature

\_\_\_\_\_  
Print Name

\_\_\_\_\_  
Print Name