



## Louisiana Identity Theft Affidavit for Unemployment Insurance Benefits Only

Louisiana Department of Revenue  
Criminal Investigations Division  
P.O. Box 2389  
Baton Rouge, LA 70821-2389  
Email: [fraud.mailbox@la.gov](mailto:fraud.mailbox@la.gov)

If you have been a victim of identity theft regarding unemployment insurance benefits, complete this form and submit it via email to: [fraud.mailbox@la.gov](mailto:fraud.mailbox@la.gov); mail to P.O. Box 2389, Baton Rouge, LA 70821-2389 or fax to (225) 219-2287. Do not submit multiple forms or documents, unless directed to do so by LDR.

**PLEASE PRINT OR TYPE**

Taxpayer's Last Name	First Name	MI	Complete Social Security Number (SSN) or your Individual Taxpayer Identification Number (ITIN)	
Taxpayer's Current Mailing Address				
City			State	ZIP
<b>If your current address is different from the address listed on your last tax return, please complete the information below.</b>				
Address on last tax return filed				
City			State	ZIP
<b>Please provide additional contact information below.</b>				
Telephone Number (    )	<input type="checkbox"/> Home	<input type="checkbox"/> Work	<input type="checkbox"/> Cell	Best time(s) to call

**Review each statement below, check the appropriate box, and fill in the blanks, where applicable.**

1. The following document was sent to me by the Louisiana Workforce Commission (LWC) indicating I was paid unemployment benefits.
  - A notice dated on \_\_\_\_\_; or,
  - A 1099-G.
2. As a result of the document I received, I suspect I was a victim of identity theft because I:
  - Did not file a claim for unemployment benefits; or,
  - Did not receive the amount of unemployment benefits that were allegedly paid to me.
3. This incidence of identity theft has impacted the:
  - Processing of my state tax return;
  - Issuance of my tax refund; or,
  - Resolution of a tax bill or other issue.
4. The information regarding my most recent state tax filing is as follows. I:
  - Have already filed my Louisiana Individual Income Tax Return for the \_\_\_\_\_ tax year;
  - Have not filed my Louisiana Individual Income Tax Return for the \_\_\_\_\_ tax year yet; or,
  - Was not required to file a state tax return for the \_\_\_\_\_ tax year.
5. My signature below authorizes the LDR to share the information I have provided with the LWC and the Internal Revenue Service.

**Check a box below and submit a photocopy of at least one of the following documents below with your form.**

Passport     Driver's license     Social Security Card     Other valid U.S. Federal or State government issued identification\*

\* Do not submit photocopies of federally issued identification where prohibited by 18 U.S.C. 701 (e.g., official badges designating federal employment).

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

Signature of Taxpayer

Date Signed (mm/dd/yyyy)