

Please note that this affidavit must be notarized

Please complete the following Identity Theft Affidavit to the best of your ability, any missing information may delay our investigation and we may need to reach out to you to gather more information.

This Affidavit must be returned to Quontic Bank along with a copy of the following documents:

- Driver's License, State Issued Identification Card, Passport, or Military Identification Card
- Proof of Residence (e.g., a copy of your utility bill or bank statement)
- Quontic Bank may require a police report as a part of the investigation, Quontic Bank's Fraud Department will notify you if the report will be required.

In addition to the completion of this form, Quontic Bank recommends that you review the Federal Trade Commission website (www.FTC.gov) for additional guidance on ways that you can protect your identity.

The Identity Theft Affidavit and supporting documents can be returned to Quontic Bank via either of the following methods:

- Mail: Quontic Bank
Attn: Fraud Department
31-05 Broadway
Astoria, NY 11106
- Email: Fraud@QuonticBank.com

Once Quontic Bank receives the completed affidavit and supporting documents, we will move forward with completing an investigation, at the completion of the investigation a letter detailing the outcome will be mailed to the address listed on your completed affidavit or via email if so requested.

We appreciate your cooperation with this investigation.

Quontic Bank Fraud Department
1-800-908-6600

Identity Theft Affidavit

About You

To be completed by the alleged victim

Full Legal Name: _____
First Middle Last

Social Security Number: _____ Date of Birth: _____

Driver's License: _____
State Number

Physical Address: _____ Mailing Address: _____

I have lived at this address since _____
MM/YYYY

Home phone: _____ Cell Phone _____

Email: _____

Do you have any valid accounts with Quontic Bank? _____ If so, please list the valid account information below:

Account Number: _____ Account Type: _____

NOTE: A police report may be required in order for us to complete our investigation. If you have filed a police report, please list the police report number and agency information below.

Police Report #: _____ Filing Agency: _____

FTC Complaint Number, if available: _____

Please provide a detailed statement describing the questioned activity and how you became aware of the account/loan being opened in your name:

Declarations

I did OR did not authorize anyone to use my name or personal information to obtain money, credit, loans, goods, or services — or for any other purpose — as described in this report.

I did OR did not receive any money, goods, services, or other benefit as a result of the events described in this report.

I am OR am not willing to work with law enforcement if charges are brought against the person(s) who committed the fraud.

I believe the following person used my information or identification documents to open new accounts, use my existing accounts, or commit other fraud:

Name: _____

Address: _____

Phone #: _____

Additional information about this person:

How do you believe that your identity information was compromised?

Signature

By signing below, I certify that, to the best of my knowledge and belief, all of the information on and attached to this affidavit are true, correct, and complete and made in good faith. I understand that this affidavit or the information it contains may be made available to federal, state, and/or local law enforcement agencies for such action within their jurisdiction as they deem appropriate. I understand that knowingly making any false or fraudulent statement or representation to the government may violate federal, state, or local criminal statutes, and may result in a fine, imprisonment, or both.

Signature

Date Signed (MM/DD/YYYY)

Notary Signature

Commission Expiration Date