UMKC Fraud/Identity Theft Claim Report

UMKC takes claims of fraud or identity theft seriously and will investigate any claims in a timely fashion. In order to conduct an investigation we ask that you please complete and submit this document and any requested documentation to the UMKC Cashiers Office as soon as you become aware of any issue. Your claim will be reviewed by the UMKC Fraud/Identity Theft Committee and you will receive a written response to your claim within 6 weeks.

Along with this completed form we also require:

- 1) Copy of a state issued photo ID
- 2) Copy of a police report related to the identity theft/fraud with the UMKC Police Department or a copy of a police report from your local jurisdiction if you are not in the KC Metro area. When filing a fraud or identity theft report with UMKC Police you should contact Srgt. Timothy Maybell at 816/235-1918.
- 3) A listing of all physical addresses, email addresses, and phone numbers assigned to you or used by you during the last 5 years. (see page 2).
- 4) A detailed summary of why you suspect identity theft or fraud on your account. Please provide a printed/typed document on a separate sheet and submit along with this form and any supporting documentation.

Full Legal Name:		Last 4 digits of SSN:		
Previous/Alternate/Mai	den Names:			
UMKC ID #:	DOB:	Last 4 digits of SSN:		
Current Address:				
Please check any/all tha	t apply:			
	tudent of UMKC, and I believe an unknoon on my student account.	own third party is responsible for fraudulent		
actions of an un	known third party.	es/recent activity on my account are the result of the		
	nd UMKC, but never enrolled in classes ny name account are the result of the a	, and the existing charges/recent activity on the account actions of an unknown third party.		
	plied for admission at UMKC or attenderses or Continuing Education Courses the	ed classes offered through UMKC, including High School hrough my employer.		
Other:				
the Admissions, Cashiers Offices associated with r all statements I have ma	s, Financial Aid and Scholarships, Intern my name currently held by UMKC in ord	te access to all educational records including those held by national Student Affairs, and Registration and Records der to complete an investigation. Furthermore, I confirm curate to the best of my knowledge. I understand that hinal penalties.		
 Signature		 Date		

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Contact/Address History

Please provide complete information for the previous 5 years (or dating back to the time of the suspected fraud) so that your fraud/identity theft claim can be investigated quickly and thoroughly. Incomplete or illegible information will impede the investigation process.

Mailing/Physical Address - include PO boxes, relatives/friends you may have lived with for any extended period, or employment addresses where you could have received correspondence.

Address	From	То	Туре
Phone Numbers – include all current and previous cell phones and person	nal line or mainli	ne at pla	ce of employment.
Phone Number	From	То	Туре
Email Addresses – include all current & previous personal or work email	addresses.		
Email address	From	То	Туре

Please submit all required document to the UMKC Cashiers Office for review. You will receive confirmation when your documents are received.

Fax: 816/235-5510 Email: cashiers@umkc.edu In Person: 5115 Oak St. #112 Kansas City, MO