

CREDIT/DEBIT CARD ABUSE FORM

INSTRUCTIONS: Entire form must be completed. You will be required to provide copies of your credit card/bank statement(s) showing the date, time, amount and location of the unauthorized transaction(s). Do not hesitate to request information from the Business who accepted the credit/debit card number used in the offense. Signed receipts, invoices and other documents collected by businesses often contain information which may lead to the identity and arrest of the person who made unauthorized transactions. All documents you are able to obtain from the businesses related to the unauthorized transactions must be submitted to the Beaumont Police Department. Further information and/or documentation may be required from you once the case is assigned to a Detective.

Failure on your part to complete this entire form and provide the above required documentations may result in criminal charges not being filed against the person(s) involved in the unauthorized transaction(s) on your account.

Victim's Name: _____ BPD Case #: _____

Your Name: _____ Date of Birth: _____ Sex: M F
Social Security # _____ Race: White Black Other
Address: _____ City & State: _____ Zip Code: _____
Home Phone#: _____ Cell Phone #: _____ E-Mail: _____
Occupation: _____ Place of Employment: _____
Work Address: _____ Work Phone #: _____

Provide the following information related to the Credit/Debit Account

Card Type: Visa: _____ MasterCard: _____ Other: _____
Issuing Bank: _____ Bank Phone #: _____
Account #: _____ Primary Account Holder: _____
Others names listed on account: _____

Provide the following information for the Credit/Debit Card used for the unauthorized transaction(s)

Name printed on Card: _____ Account # printed on Card: _____
Use of card requires a PIN #: Debit: _____ Credit: _____ Not required: _____
Have you given PIN # to anyone? No: _____ Yes: _____ Who? _____
Do you have Card in your possession? Yes: _____ No: _____
If no, did you lose the card or was it stolen? Lost: _____ Stolen: _____
If stolen did you report the theft to the police? Yes: _____ No: _____
Date Reported: _____ Police Agency: _____ Phone #: _____
Agency's Report #: _____ Name of Detective: _____

Provide the following information for the unauthorized transaction(s)

Have you notified your Bank and/or Credit Card Company? Yes: _____ No: _____
If yes, name of the Bank Representative: _____ Phone #: _____

Have you filed any affidavit(s) with your Bank /Credit Card Company concerning the unauthorized transactions on your account? No: _____ Yes: _____ If yes, copies of the affidavit(s) must be provided to the Beaumont Police Department for the investigation.

Provide the following information for the unauthorized transaction(s)

Date Occurred	Time Occurred	Name of business and address where card was used:	Amount

The unauthorized transaction(s) occurred at:

Beaumont Business _____ Business outside Beaumont _____ Internet or phone purchase _____

Information on the person who made the unauthorized transactions

Do you know who used the card for the unauthorized transactions? Yes _____ No _____

If yes, how do you know this person?

Relative _____ Friend _____ Co-worker _____ Other _____

If this person is related to you describe relationship: _____

If the person is known to you, list all known information about this person:

Name _____ DOB _____ Address _____ Phone # _____

Other information known about person: _____

This form along with the required documents must be returned to the Beaumont Police Department on or before the 10th day after your received this form. This form along with the documents maybe turned in at the Beaumont Police Department, mailed or faxed.

**Beaumont Police Department
Attn: CID – Financial Crimes
P.O. Box 2827
Beaumont, Texas 77704
Fax # 409-880-3895**