



**City of Conyers Police Department
Financial Crime Statement**

Case #

Instructions

1. Please provide the following information to better assist in the investigation. If you do not know the answers, simply fill in the areas you can. All answers should be applicable to the crime reported.
2. Please provide copies of bank statements, credit card statements, checks (both sides), affidavits of forgery and any related correspondence as soon as possible.
3. If possible, please include originals or copies of all available documents at the time of your initial report.

Financial crime involves unauthorized use of:

Check Credit Card Identity Other_____

Account Number(s):	Check Number(s):	Credit Card Number(s):
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Banking / Financial Institution(s):	Banking Branch(s):
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Banking Contact Name(s):	Banking Contact Telephone Number(s):
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What is your name / address / telephone number(s):

How was this incident brought to your attention?

Do you know the suspect? If so, please provide that person(s) name and contact information.

If the suspect is identified, are you willing to prosecute? Yes No

Have the accounts or cards been closed / cancelled? Yes No

Consent to Access Account Information

I hereby authorize the Conyers Police Department to act as my agent concerning all matters related to this case or any associated financial crime. I request that any business, agency, or any person with information or documents concerning this case, provide that information to the Conyers Police Department upon their request.

I did not authorize anyone to use my name, personal identification or accounts to seek the money, credit, loans, goods or services described in this police report. I certify that the foregoing is true and accurate to the best of my knowledge.

Signature: **X** _____