



U.S. Postal Inspection Service Mail Fraud Report

Subject of Complaint

| | | | |
|--------------------------------|--------------------------------|--------------------------------|---------------|
| Company Name | | First Name | Last Name |
| Address | | | |
| City | State | ZIP+4 [®] | Country |
| Cell Phone (Include Area Code) | Work Phone (Include Area Code) | Home Phone (Include Area Code) | Email Address |
| Fax Phone (Include Area Code) | Website Address | | |

Your Information

| | | | |
|--------------------------------|--------------------------------|--|---------------|
| First Name | Last Name | Age Range: <input type="checkbox"/> 12-17 <input type="checkbox"/> 18-19 <input type="checkbox"/> 20-29 <input type="checkbox"/> 30-39 <input type="checkbox"/> 40-54 <input type="checkbox"/> 55-64 <input type="checkbox"/> 65 or older | |
| Address | | | |
| City | State | ZIP+4 [®] | Country |
| Cell Phone (Include Area Code) | Work Phone (Include Area Code) | Home Phone (Include Area Code) | Email Address |

How Were You Contacted?

Check one of the following: **PLEASE RETAIN ANY ORIGINAL DOCUMENTS. IF NEEDED, YOU WILL BE CONTACTED.**

- U.S. Mail™
 Telephone _____ Internet ISP _____ Website _____ Email _____
 Other _____

| | | |
|---|--|--|
| On what date were you contacted? / / | If by mail, do you have the envelope it was mailed in? <input type="checkbox"/> Yes <input type="checkbox"/> No | Does the envelope have a permit number? Permit Number _____ |
| Does the envelope have a postage meter number? <input type="checkbox"/> Yes <input type="checkbox"/> No | Postage Meter Number _____ | Permit City _____ Permit State _____ |

How Did You Respond to this Offer?

- Check one of the following:
 U.S. Mail
 Telephone _____ Internet ISP _____ Website _____ Email _____
 Other _____

To what name and address did you mail your response? _____

Do you have a mailing receipt (Certified, Insured, or Priority Mail Express™)? Yes Mail Receipt Number: _____

What did you receive? _____

How did it differ from what you expected? _____

| | | |
|--|---|---|
| How much did the company ask you to pay? | Do you have the item? <input type="checkbox"/> Yes <input type="checkbox"/> No | How was it delivered? <input type="checkbox"/> U.S. Mail™ <input type="checkbox"/> Private Courier <input type="checkbox"/> In Person <input type="checkbox"/> Other _____ |
|--|---|---|

Have you contacted the company or person about the complaint? Yes No

If yes, date of last contact ____/____/____ If no, why? Address Unavailable Addressee Not at Address
 Disconnected Telephone Unlisted Telephone Unanswered Telephone

Legitimate businesses appreciate feedback. Check the offer for the delivery time frame, usually six to eight weeks, then contact the company. Please wait two weeks after contacting them before sending us this form. When a delivery time is not specified, a Federal Trade Commission rule mandates fulfillment within 30 days, unless you applied for first-time credit with the company.

Did You Lose Money?

- No Yes If Yes, how much (in U.S. dollars)? _____ Date of Last Payment ____/____/____
How did you pay? (check one)
 Cash Postal Money Order (Provide Postal Money Order Number) _____
 Money Transfer Service (Provide Transfer Service Name & Number) _____ Transfer Number _____
 Pay Pal Debit Card/Credit Card Check Other Money Order
 Other (explain) _____

Type of Mail Fraud Complaint

Find the general category below that describes your area of concern, and check the specific item. (Check one only.)

Advance Payment

- Credit Card
- Credit Repair, Debt Consolidation
- Loans
- Medical Services

Chain Letter

Charity Fraud

Contest, Prize, or Sweepstakes

Educational Fraud

- Certification
- Degree

Employment

- Distributorship, Multilevel Marketing
- Overseas Job
- Postal Service Job
- Secret Shopper
- Work at Home

False Bill or Notice

- Classified Ad
- Collection Agency Notice
- Directory Solicitation
- Office Supplies
- Subscription/Periodical
- Taxes

Fiduciary

(Perpetrated by person in position of trust, financial advisor, attorney, etc.)

- Bribery, Kickbacks, Embezzlements
- Estate
- Financial Planning
- Will

Harassment

(Merchandise ordered in your name without your consent.)

Insurance

- Health Care-Related
- Life Insurance Related
- Property Insurance Related

International Fraud

Investment

- Franchise
- Gems, Coins, Precious Metals
- Securities, Stocks

Lottery

(You pay to play.)

- Domestic
- Foreign

Medical Quackery

- Medical Cure
- Sexual Aid
- Weight Loss

Merchandise or Services

- Failure to Pay
- Failure to Provide
- Internet Auction
- Misrepresentation of Product or Service

Mortgage Fraud

- Foreclosure Rescue
- Mortgage Modification
- Reverse Mortgage

Personal

- Dating Service
- False Divorce Decree
- Mail Order Bride

Real Estate

- Land Sales
- Timeshare
- Vacation or Travel

Sexually Oriented Advertisement

Other _____

Additional Information

Provide any additional information you feel is important regarding this complaint in the space below:

Thank you for completing this form. Please mail to the address below all copies (not originals) of bills, receipts, advertisements, canceled checks (front and back), or correspondence related to your report. The U.S. Postal Inspection Service is a federal law enforcement agency, and Postal Inspectors gather facts and evidence to determine whether a violation has occurred under the Mail Fraud or False Representation Statutes. While we can't guarantee you will recover money lost to fraud, your information can help alert Inspectors about new fraud schemes and prevent others from being victimized. Postal Inspectors base mail fraud investigations on the number, substance, and pattern of complaints received from the public; therefore, we ask you to keep all original documents relating to your complaint, including the solicitation, any mailing envelopes, and canceled checks. Under our Consumer Protection Program, Postal Inspectors may contact individuals or businesses on your behalf to request that complaints be resolved. We will contact you if more information is needed. Postal Inspectors caution that, once you have been targeted in a fraud scheme, your name may be passed along to other con artists, so beware of future solicitations. If you know of others who believe they were victimized by fraud, we recommend they submit a Mail Fraud Report. Postal Inspectors suggest that, before completing a business transaction, contact the Chamber of Commerce, Better Business Bureau, or county or state Office of Consumer Affairs where the firm is located to get information on the company. Visit the Better Business Bureau at bbb.org, the state National Association of Attorneys General at naag.org, and the Postal Inspection Service at postalinspectors.uspis.gov for more information on fraud involving use of the mail. Remember: If a deal sounds too good to be true, it probably is!

Return this form to your postmaster, or mail to:

CRIMINAL INVESTIGATIONS SERVICE CENTER
ATTN: MAIL FRAUD
433 W HARRISON STREET, RM 3255
CHICAGO IL 60699-3255

Privacy Act Statement. The collection of this information, which will be used to address your complaint, is authorized by 39 USC 404, 18 USC 3061, and 5 USC, App. 3. It may be disclosed to an agency that requests information in the course of a background check; to an appropriate government agency, domestic or foreign, for law enforcement purposes; if pertinent, in a legal proceeding to which the USPS is a party or has an interest; to a government agency in order to obtain information relevant to a USPS decision concerning employment, security clearances, contracts, licenses, grants, permits or other benefits; to a government agency upon its request when relevant to its decision concerning employment, security clearances, security or suitability investigations, contracts, licenses, grants or other benefits; to a congressional office at your request; to an expert, consultant, or other person under contract with the USPS to fulfill an agency function; to the Federal Records Center for storage; to the Office of Management and Budget for review of private relief legislation; to an independent certified public accountant during an official audit of USPS finances; to an investigator, administrative judge or complaints examiner appointed by the Equal Employment Opportunity Commission for investigation of a formal EEO complaint under 29 CFR 1614; to the Merit Systems Protection Board or Office of Special Counsel for proceedings or investigations involving personnel practices and other matters within their jurisdiction; and to a labor organization as required by the National Labor Relations Act; to an appropriate foreign or international law enforcement agency, organization or individual for investigative or prosecutorial purposes; to assist in crime prevention or detection; to obtain information relating to a pending investigation, trial or hearing; to obtain the cooperation of a witness or informant, or to notify of the status of the case; to a party or their attorney to discuss settlement, plea bargaining or discovery proceedings; to an agency or individual concerned with maintenance, extradition or release of a person held in custody; to a foreign country pursuant to an international treaty, convention or executive agreement; to the public, news media, trade associations or organized groups, if it is of interest, on accomplishments of the USPS or its employees; to a foreign country when apprehending or returning a fugitive to a jurisdiction seeking return; to American Insurance Association Index System members if it relates to accidents or injuries; or to elicit information from or alert organizations or individuals that share an electronic bulletin board with respect to potential criminal activity. Completion of this form is voluntary; however, the Postal Inspection Service may not be able to address your complaint if the information is not provided.

Name and Signature _____

Date _____



Mail Theft Complaint

Type of problem:

- Mail Not Received
- Mail Tampering/Vandalism
- Mail Received Without Contents

Complainant/Victim Information

First Name Middle Last

Company

Address

City State

ZIP

Home Phone

Work Phone

E-Mail

How is your mail delivered (choose one)?

- Rural Box
- Porch
- Business
- Apartment Panel
- Neighborhood Cluster Box
- Door Slot
- Other

Article was mailed from:

Same as Complainant/Victim Information

| | | | | | |
|------------|----------------------|--------|----------------------|------|----------------------|
| First Name | <input type="text"/> | Middle | <input type="text"/> | Last | <input type="text"/> |
| Company | <input type="text"/> | | | | |
| Address | <input type="text"/> | | | | |
| City | <input type="text"/> | State | <input type="text"/> | | |
| ZIP | <input type="text"/> | | | | |
| Home Phone | <input type="text"/> | | | | |
| Work Phone | <input type="text"/> | | | | |

Article was addressed to:

Same as Complainant/Victim Information

| | | | | | |
|------------|----------------------|--------|----------------------|------|----------------------|
| First Name | <input type="text"/> | Middle | <input type="text"/> | Last | <input type="text"/> |
| Company | <input type="text"/> | | | | |
| Address | <input type="text"/> | | | | |
| City | <input type="text"/> | State | <input type="text"/> | | |
| ZIP | <input type="text"/> | | | | |
| Home Phone | <input type="text"/> | | | | |
| Work Phone | <input type="text"/> | | | | |

Type of Mail

Letter Size Large Envelope Parcel

Date Mailed (mm/dd/yyyy)

- Class** First-Class Priority Periodicals (magazines) Return Receipt
 Delivery Confirmation Express Certified Registered
 Parcel Post Insured

Tracking Number (if applicable)

Contents of Mail: (Select all that apply)

- Audio/Visual Coins/Cash Checks/Convenience Checks
 Money Orders Credit/Debit/ATM/Bankcard Financial Statement
 Gift Card/Stored Value Phone Card Electronic Merchandise
 Greeting Card Prescription Drugs Clothing Jewelry/Precious Metals
 Stocks/Bonds/Securities Other

Comments

Suspect Information

Provide the following information, if available:

First Name Middle Last
Address
City State
ZIP

Gender Male Female

Weight Height (inch)

Eye Color

Black Blue Brown Gray Green Hazel

Hair Color

Bald Blonde/Strawberry Black Brown Gray Red/Auburn
 Sandy White

Age

Race

American Indian/Native Alaskan Asian/Asian Pacific Black
 Hispanic/Latin White Other

Clothing Description
Other Details

Suspect Vehicle

Make Model Year
Color Tag No.

Were Police Notified? Yes No

Police Report No.

Description of Complaint

The U.S. Postal Inspection Service gathers data on mail-related crime to determine whether a violation has occurred. While we can't guarantee that we can recover lost money or items, your information can help alert Postal Inspectors to problem areas and possibly prevent others from being victimized. Postal Inspectors base their investigations on the number, substance, and pattern of complaints received from the public. We ask you to keep all original documents related to your complaint. We will contact you only if more information is needed.

The U.S. Postal Inspection Service will use your information to support investigations of criminal, civil, or administrative matters, as authorized by 39 USC 401 and 404, and 18 USC 3061. We may only disclose appropriate information as follows:

In relevant legal proceedings.

To law enforcement groups, when the U.S. Postal Service or requesting agency becomes aware of a violation of law.

To a congressional office, at your request.

To entities or individuals under contract with the U.S. Postal Service.

To entities authorized to perform audits.

To labor organizations, as required by law.

To federal, local, state, or foreign government agencies for personnel matters.

To members of the public, news media, trade associations, or organized groups for the U.S. Postal Service's public interest purposes.

To a federal, state, local, or foreign prison, probation, parole, or pardon authority; or to any agency involved with the maintenance, transportation, or release of a person held in custody.

To a foreign country, to the extent necessary to assist the country in apprehending or returning a fugitive to its jurisdiction.

Please forward your complaint to: United States Postal Inspection Service, Criminal Investigations Service Center, 433 W. Harrison Street, Room 3255, Chicago, IL 60699-3255.