



Extended Alert Request

To place an extended fraud alert on your credit file, you will need to complete this form and print it. Mail the form, as well as a copy of your identity theft report and proof of both your identity and current address, to TransUnion at the address provided. You must photocopy and include one (1) item from the "Identity" list below and two (2) items from the "Address" list. NOTE: The item you select from the identity category must contain your Social Security number and the items you select from the address category must contain your current mailing address.

Identity

- Social Security card
- Letter from Social Security Administration
- Military ID
- Medicaid or Medicare card

Address

- Drivers license
- Utility bill
- Bank or credit union statement
- Canceled check
- Signed homeless shelter letter
- Stamped post office box receipt
- Government issued ID
- State ID card

First Name

Last Name

Middle Initial

Suffix

Current Address

City

State

ZIP Code

Former Address

City

State

ZIP Code

Social Security Number

Date of Birth (mm/dd/yy)

In the event that a creditor needs to contact me, please use the telephone number(s) I have provided below.

Phone Number 1

Ext.

Phone Number 2

Ext.

Please send your completed form and required supporting documentation by standard mail to:

TransUnion
P.O. Box 2000
Chester, PA 19016