Amherst Police Department

500 John James Audubon Parkway ● Amherst, NY ● 716-689-1322 financialscam@apdny.org

You are a victim of a financial scam. What do you do now?

You have received this electronic form because you have unfortunately fallen victim to a financial scam. To best serve you, we are requesting your assistance in completing this form to the best of your ability. We understand not all the requested information pertains to you and your case, so please complete what you believe to be appropriate to your circumstances. Financial crime investigations can be time-sensitive, so we are looking to condense the timeline with your cooperation.

Please complete this form electronically or via hard copy as soon as possible. However, where possible, it is preferred to complete and submit electronically. Upon completion of the form, please return the electronic form by emailing it to financialscam@apdny.org, with your complaint number in the subject line. Your form will then be forwarded to the Detective assigned to your case. If you completed a hard copy, please have the form for presentation to the detective assigned to your case, or return said form to Amherst Police Headquarters with your complaint number noted on the form.

You may also want to contact one of the three national credit reporting companies (below) and ask that it place a fraud alert on your credit file. The credit reporting company you contact will automatically report the fraud alert to the other credit reporting companies. A fraud alert will notify potential creditors to verify your identity before extending additional credit in your name. Placing a fraud alert is free and typically lasts up to one year or until you ask for it to be removed.

You can also request a free security freeze. A security freeze restricts access to your credit file, making it harder for identity thieves to open accounts in your name. You will have to contact each credit reporting company to place a freeze. A security freeze will not be lifted unless you request it.



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(716) 689-1322 General Fax: (716) 689-1383 | Bureau Fax: (716) 689-1310

		COMPLAINT #:
<u> </u>	INANCIAL SC	AM INTAKE QUESTIONNAIRE
NOT	E: Complete this form electro	onically to allow for searching and cut-and-paste of relevant data.
1. VICT	IM Info	
	Name:	
	DOB:	
	Address (residence):	
	Address (work):	
	Occupation:	
	Current phone number:	
	DL/ID Number:	
	Current email address:	
3. Wha	t is the amount of actual fin	ancial loss you suffered, if any?
	t bank accounts, cryptocurre e from?	ency wallet address(es) or exchange account(s) did the losses



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_	much detail as possible the transactions involved, including sending and
•	ansaction IDs, date/time, and amounts.
(Make as many copies	of this table as you need.)
Cryptocurrency type	
Transaction ID	
From what wallet /	
address / exchange?	
To address(es)	
Date/Time	
Amount Sent	
Other information	
Cryptocurrency type	
Transaction ID	
From what wallet /	
address / exchange?	
To address(es)	
Date/Time	
Amount Sent	
Other information	
Bank Name	
Name on Account	
Address of Account	
Routing Number	
Account Number	
Amount / Date Sent	
Other information	
Bank Name	
Name on Account	
Address of Account	
Routing Number	
Account Number	
Amount / Date Sent	
Other information	



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- 7. Describe what happened including how you first came into contact with the suspect, what means of communication you used, what accounts were used, what claims were made, and what actions resulted in financial loss.
- 8. Please identify, as specifically as possible, any websites or applications used in this scheme.
- 9. When was your last contact with the suspect or anyone connected to the suspect, and what was that interaction?
- 10. Please identify any accounts involved in this incident, such as those used to communicate with a suspect and those used to send or receive any financial assets.

 (Make as many copies of this table as you need.)

Account 1			
Type of account / Platform			
Account identifier (username)			
Account identifier (number or other ID)			
How was this account involved?			
Who created and/or used the account?			
Did the suspect have access to this			
account at any time?			
Please provide any supporting documentation available such as screen shots, downloads, emails			
received from service providers etc			

Account 2			
Type of account / Platform			
Account identifier (username)			
Account identifier (number or other ID)			
How was this account involved?			
Who created and/or used the account?			
Did the suspect have access to this			
account at any time?			
Please provide any supporting documentation available such as screenshots, downloads, emails			
received from service providers, etc.			



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		Account 3			
Type of account / Platform					
Account identifier (username)					
Account identifier (number or ot	her ID)				
How was this account involved?					
Who created and/or used the acc	count?				
Did the suspect have access to the	is				
account at any time?					
Please provide any supporting documentation available such as screenshots, downloads, emails					
received from service providers, o	etc.				
		Account 4			
Type of account / Platform					
Account identifier (username)					
Account identifier (number or ot	her ID)				
How was this account involved?					
Who created and/or used the acc					
Did the suspect have access to the	is				
account at any time?					
, , , , ,		ation available such as screenshots, downloads, emails			
received from service providers,	etc.				
11. If you have reported this incident to any other law enforcement agency, including iC3, please list that information below. (Make as many copies of this table as you need.)					
Agency/Department					
Reference or case number					
Contact person, if applicable					
Status					
Agency/Department					
Reference or case number					
Contact person, if applicable					
Status					
<u> </u>					



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12. Describe any attempts you have made to recall wire transfers, trace and/or recover your cryptocurrency, including any contact you have made with banks and/or exchanges.
13. Please include any other information you believe will assist in the investigation. Supporting documents, files, and screenshots may be included but are not a substitute for completing the items requested in this form.
14. Additional Information: