



State of Hawaii
Department of Labor and Industrial Relations
Unemployment Insurance Division
830 Punchbowl St., Rm. 340, Honolulu, Hawaii 96813

DECLARATION OF IDENTITY THEFT

Complete this form if you received a 1099-G from the State of Hawaii, Department of Labor and Industrial Relations **AND** you did not file a claim for unemployment benefits.

Last name: _____ First Name: _____ MI: _____
(Print) (Print) (Print)

Social Security Number: _____
(Last four digits only)

Address: _____

Telephone No. with area code: _____ (Home) _____ (Cell)

Email: _____

Please check all that apply:

☐ I did not file or attempt to reopen a claim for unemployment benefits with the information above.

☐ I did not receive any unemployment benefit payments.

ATTACHMENTS

IMPORTANT: Attach a copy of the 1099-G issued in your name.

If available, attach copies of other documentation showing that a fraudulent claim for unemployment benefits was filed in your name. Examples of such documentation are a police report, report from the FTC, and IRS Form 14039 Identity Theft Affidavit.

Certification: I _____ received a 1099-G from the
(Print Name)

State of Hawaii, Department of Labor and Industrial Relations and did not file a claim for unemployment benefits with the State of Hawaii for calendar year 20__, and declare under penalty of law that the foregoing is true and correct.

(Signature) Date: _____

Mail completed form to: Department of Labor and Industrial Relations
Unemployment Insurance Division
Attn: Internal Security Section
830 Punchbowl Street, Room 340
Honolulu, Hawaii 96813