Declaration of Identity Theft

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

Last name:(Pri	nt)	_ First name:	(Print)	MI: (Print)
Social Security number: xx				
Email:				
Please check all that apply:				
☐ I did not file or attem☐ I did not receive any	•	• •	benefits with the	information above.
Attachment reque	est			
	ne may have filed a Federal Trade Comi	fraudulent claim for mission (FTC)		ch copies of other documents name. These can include:
I, Industrial Relations and did r information is correct and ur				
Your Signature		 Date		_
Mail completed form to:	Unemployment II	abor and Industrial F nsurance Division Street, Room 324	Relations	

Honolulu, Hawaii 96813