| <u>ADU</u> | <u>ILT letter</u> requestir   | ng security freeze                  |   |
|------------|---|-------------------------------------|---|
| Date:      | <u> </u>  |                                     |   |
| Dear       | TransUnion P.O. Box 2000 Chester, PA 19022  |                                     |   |
| l wou      | ld like to place a secu   | rity freeze on my credit file.      |   |
| My na      | ame is:   |                                     |   |
|            | (first)   | (middle initial)                    | (last)                                    |
| Му с       | urrent address is:  |                                     |   |
| My la      | st former address was   |                                     |   |
|            |   | · is:                               |   |
| As p       | roof of identity and res  | sidence, I am enclosing <b>co</b> r | pies of all of the following:             |
| •          | My Social Security  | card or certified official copy     | of my birth certificate.                  |
| •          | My government issucard).  | ued photo ID (driver's licens       | se, passport, state or military issued ID |
| •          | A recent utility bill, bank statement or insurance bill that reflects my current address.                     |                                     |   |
| CHEC       | CK ONE:   |                                     |   |
|            | l am an identity theft v  | rictim and a copy of the polic      | ce report is enclosed.                    |
|            | I am <b>not</b> an identity theft victim. I am enclosing a \$10.00 check made payable directly to Transunion. |                                     |   |
|            |   |                                     |   |
|            |   | (Your signature                     |   |

Wisconsin residents may use this form to request a security freeze with Experian, TransUnion or Equifax. Completed forms should be sent certified mail directly to each credit reporting agency. Contact your local US Post Office with certified mail questions. The credit reporting agencies may contact you in writing, regarding errors, incomplete information or a need for further submissions. This form is provided by the Wisconsin Department of Agriculture, Trade and Consumer Protection – Office of Privacy Protection.