(SPID22) Victims of Identity Theft Statement- Spouse

2024-2025

	Office of Financial Aid • 4202 East Fowler Avenue, SVC 1102 • Tampa, Florida 33620-6960
Student's Name:	
USF ID: U	Date of Birth: / / /
	elated identity theft, please submit the following:
 A Tax Return DataBase View (TRDBV) trans A statement signed and dated by the tax file that the IRS has been made aware of the tax 	indicating that he or she was a victim of IRS tax-related identity theft and
Please sign the appropriate response below:	
Spouse:(SPID22)	
I certify that I, identity theft and the IRS has been n	otified.
	formation for documents are punishable by fine or imprisonment and may ved on the basis of the information and documents I have provided.
Any alteration to this form will not be accepted. A signatures will not be accepted.	Ill signatures must be handwritten, or signed with DocuSign. Typed
Spouse Signature:	Date: