



Insurance Fraud Private Citizen Referrals

Insurance Fraud Section
 16th Floor, Strawberry Square
 Harrisburg, PA 17120

717-787-0272

www.attorneygeneral.gov

For State Use Only

IFR -	Region Assigned:
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Required fields are marked with an asterisk*

Referring Private Citizen Information

<input type="checkbox"/> Check here if referring anonymously and continue to Suspect Information				
Name				
Address				
City		State	Zip Code	County
Phone Number ()	Fax Number ()	Email Address		

Suspect Information (If additional suspects are involved please include in Summary)

Name (include any known aliases)*				
Date of Birth	Sex <input type="checkbox"/> Male <input type="checkbox"/> Female	Social Security Number		
Street Address				
City		State	Zip Code	County
Mobile Phone Number ()	Home Phone Number ()	Email Address		
Address Type: <input type="checkbox"/> Residential <input type="checkbox"/> Business <input type="checkbox"/> Other				

Claim Information (If additional companies are involved, please include in Summary)

Insurance Company	Claim Number	Policy Number
Date of Loss	Date Claim Filed	Amount Paid \$

