



## INFORMATION ABOUT FALSE IDENTIFICATION

**NOTE: THE CITY ATTORNEY'S OFFICE CANNOT DISCUSS YOUR CASE WITH YOU EVEN IF YOU HAVE BEEN WRONGFULLY ACCUSED.**

<b>Please complete the <u>entire</u> form.</b>		<b>(Please Print)</b>	
Your Name	Date of Birth	Social Security Number	
Your Street Address	City	State	Zip Code
Your Home Telephone Number	Your Work Number	Extension	

<b>Seattle Municipal Court Case(s) Involving False Use of Your Name</b>			
Charges	Case or Citation Number	Violation Date	Court

**Your statement concerning your lack of involvement in incident(s) [i.e., "I was not in Seattle on that date," "I have never received a citation," etc.]**

**Name, address and identifying information about person who gave your name, if known:**

Name	Address	City, State	Zip	Telephone
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Identifying Information:

How do you know this person?

Please explain why you believe this individual used your name:

If you have an attorney, your attorney's name: \_\_\_\_\_ Telephone number: \_\_\_\_\_

***I certify under penalty of perjury under the laws of the State of Washington that the foregoing is true and correct.***

Your signature	Date	Location
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