

FRAUD REPORT

K-FRD 310 (Rev. 11-24)

If you suspect someone has committed unemployment fraud, which includes filing claims using you or your employees' name and personal information, please provide the requested information.

Complete **either** the employer (top) or individual (bottom) section to report suspected fraud.

If you are an employer reporting suspected fraud, complete this portion.

Company name: _____

FEIN: _____ Kansas Employer Account number: _____

Employee name (first, MI, last): _____ Last four digits of SSN: XXX-XX-_____

Street address: _____ City: _____ State: _____ ZIP: _____

Phone: _____ Email: _____

Do you believe this is a case of identity theft? YES NO

Please provide any additional information you may have:

Do you know who is committing the fraud? YES NO If YES, provide name: _____

If you are an individual reporting suspected fraud, complete this section.

Name (first, MI, last): _____ Last four of SSN: XXX-XX-_____

Street address: _____ City: _____ State: _____ ZIP: _____

Date of birth: _____ Phone: _____ Email: _____

Do you believe this is a case of identity theft? YES NO

Please provide any additional information you may have:

Do you know who is committing the fraud? YES NO If YES, provide name: _____