



Michael Preston
SECRETARY OF COMMERCE
Charisse Childers, Ph.D.
DIRECTOR,
DIVISION OF WORKFORCE SERVICES

SAMPLE NOTICE

Date

Claimant Name
Mailing Address
City, State Zip

Claim Benefit Year/Quarter:

Dear Sir/Madam:

We have received information that the above-referenced claim for Unemployment Insurance was not filed by the individual listed on the claim or that subsequent activity was initiated by someone other than the individual listed on the claim. In order to resolve this allegation, please take the following steps within 7 days from the date of this letter if you have not done so already:

- **File a police report for possible identity theft if there has been any activity on the above-referenced claim by someone other than yourself.**
- **Submit a copy of your police report electronically to ADWS.InternalAudit@arkansas.gov or in-person at your nearest Arkansas Workforce Center (find a location at <https://www.dws.arkansas.gov/contact/>).**

Claims cannot be fully resolved without the information requested above. Failure to resolve the issue may result in the issuance of an IRS 1099-G for any benefits paid.

You may continue to receive some auto-generated notices in the mail (e.g. Notice of Monetary Determination, Notice of Bank Information Change, etc.). If you have already reported the fraudulent claim utilizing the steps listed above, please disregard the additional notices. The notices do **not** require an additional email or police report to be filed.

If you did file this claim for Unemployment Insurance, please take this letter and your state-issued identification to your nearest Arkansas Workforce Center in order to resolve the issue.

If you have any questions, please contact the Fraud Hotline at (501) 682-1058 and leave a message if there is no answer. Voicemail is monitored daily.