

This is a draft complaint and has not been submitted to the IC3.



### Complaint Referral Form Internet Crime Complaint Center

**Note:** Fields marked with \* are required.

#### Victim Information

受害者信息

\* **Name:**  姓名- 名字+姓氏

Are you reporting on behalf of a business?  Please select one...  您是否代表企业投诉

Business Name:

Is the incident currently impacting business operations?  Please select one...

年龄 **Age:**  Please select one...

地址 \* **Address:**

Address (continued):

Suite/Apt./Mail Stop:

城市 \* **City:**

County:

国家 \* **Country:**  Please Select One...

State:  [None]

邮编 \* **Zip Code/Route:**

电话号码 \* **Phone Number:**  numbers only (1112223333)

电子邮箱 \* **Email Address:**  jdoe@email.com

Business IT POC, if applicable:  Name, Email, Phone number, etc.

Other Business POC, if applicable:  Name, Email, Phone number, etc.

#### Financial Transaction(s)

金融交易

请填写与此投诉相关的每笔金融交易或尝试交易的每一笔。 如果没有财务详细信息, 请继续下一部分

Please complete one section for each financial transaction or attempted transaction related to this complaint. If there are no financial details, please proceed to the next section.

交易类型 **Transaction Type:**  Please select one...

If other, please specify:  Payment Method

金额 **Transaction Amount:** \$  0.00

日期 **Transaction Date:**  MM/DD/YYYY

是否汇款了 **Was the money sent?**  Please select one...

(If funds were recovered, please provide details in Description of Incident.)

受害者银行名字 **Victim Bank Name:**

银行地址 **Victim Bank Address:**

Victim Bank Address (continued):

Victim Bank Suite/Mail Stop:

城市 **Victim Bank City:**

国家 **Victim Bank Country:**  [None]

州 **Victim Bank State:**  [None]

邮编 **Victim Bank Zip Code/Route:**

银行户口名字 **Victim Name on Account:**

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Victim Account Number:

骗子银行名字 Recipient Bank Name:

地址 Recipient Bank Address:

Recipient Bank Address (continued):

Recipient Bank Suite/Mail Stop:

城市 Recipient Bank City:

国家 Recipient Bank Country: [None]

州 Recipient Bank State: [None]

邮编 Recipient Bank Zip Code/Route:

账户名字 Recipient Name on Account:

路由号码 Recipient Bank Routing Number:

账户号码 Recipient Account Number:

银行国际代码 Recipient Bank SWIFT Code:

Description of Incident

\* Provide a description of the incident and how you were victimized. Provide information not captured elsewhere in this complaint form.

请描述事件的经过以及您是如何受害的。 提供本投诉表中其他地方未记录的信息

Which of the following were used in this incident? (Check all that apply.)

- Spooferd Email
Similar Domain
Email Intrusion
Other Please specify: 填写 social media

Law enforcement or regulatory agencies may desire copies of pertinent documents or other evidence regarding your complaint.

Originals should be retained for use by law enforcement agencies.

Information About The Subject(s) Who Victimized You

骗子的信息

Please complete one section for each subject who victimized you. If subject(s) are not known, proceed to the next section.

名字 Name:

商业名字 Business Name:

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Address:

地址 Address (continued):

Suite/Apt./Mail Stop:

城市 City:

国家 Country: [None]

State: [None]

邮编 Zip Code/Route:

电话号码 Phone Number:  numbers only (1112223333)

电子邮箱 Email Address:  jdoe@email.com

网址 Website:  http://www.example.com/

IP Address:  123.45.67.89 or 2001:abc::1234

Other Information

其他信息

If an email was used in this incident, please provide a copy of the entire email including full email headers. 如果在此事件中使用了电子邮件，请提供整个电子邮件的副本，包括完整的电子邮件标题

Are there any other witnesses or victims to this incident?

此事件是否有其他目击者或受害者

If you have reported this incident to other law enforcement or government agencies, please provide the name, phone number, email, date reported, report number, etc.

如果您已将此事件报告给其他执法部门或政府机构，请提供名字、电话号码、电子邮件、报告日期、报告编号等

Check here if this an update to a previously filed complaint:

Who Filed the Complaint

投诉者

\* Were you the victim in the incident described above?  Please select one...  你是否是以上事件的受害者

If not, please provide us with your contact information:

名字 Name:

Business Name:

电话号码 Phone Number:  numbers only (1112223333)

电子邮箱 Email Address:  jdoe@email.com

Digital Signature

电子签名

Read the following statement below, and confirm your agreement by typing your full name below in the box provided:

By digitally signing this document, I affirm that the information I provided is true and accurate to the best of my knowledge. I understand that providing false information could make me subject to fine, imprisonment, or both. (Title 18, U.S. Code, Section 1001)

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