



**INVESTOR PROTECTION UNIT
DELAWARE DEPARTMENT OF JUSTICE**

Report of Suspected Financial Exploitation
Pursuant to 31 Del. C. § 3910

I. Reporting Financial Institution

Date:	IPU # (IPU use only)	
Financial Institution:	Address:	
Contact Person:	Phone:	Email:
Alternate Contact:	Phone:	Email:
Has the financial institution reported suspected exploitation to a family member of other designee? If yes, please provide their name and contact information:		
Has a disbursement been delayed?		
What actions, if any, has the Reporting Financial Institution taken?		

II. Individual / Account At Risk of Exploitation

Name:	Date of Birth:
Address:	Gender:
Email address:	Phone:
Circumstances of Person Identified At Risk (physical disability, financial dependency, etc.):	

Account(s) involved:
Is this a joint account? If yes, name(s) on the account:
Is there a Power of Attorney, Financial Guardian, or Representative Payee associated with this account?

III. Individual(s) Suspected of Exploitation (if known)

Name:	Date of Birth:
Address:	Gender:
Email address:	Phone:
Relationship to Individual At Risk:	

IV. Reporting Party

Was the suspected exploitation reported to the financial institution by a third party?	
Name of Reporting Party:	Relationship to Individual At Risk:
Reporting Party Phone:	Reporting Party Email:
Reporting Party Address:	

V. Description of Incident

Describe the incident in as much detail as possible. Use additional pages if necessary:

VI. Supporting Documents

Please attach supporting documents (financial records, etc.). Please list attached documents below:

When finished, please save a copy for your records and submit this form, along with any supporting documents, via email to the Investor Protection Unit at IPU.seniorprotection@state.de.us. You may also report suspected financial exploitation via telephone at (302) 577-8424.

Please be advised that all reports of suspected financial exploitation will remain confidential.