



**STATEMENT OF NON-RECEIPT OF UNEMPLOYMENT (UI) BENEFITS**  
South Carolina Department of Employment and Workforce

**INSTRUCTIONS:** *The purpose of this form is to inform the South Carolina Department of Employment and Workforce ("Department") that the below individual is not in receipt of Unemployment Benefits, either due to the fact that: (1) he/she did not file a claim and was the victim of Identity Theft; or (2) he/she filed a claim and his/her account was subsequently accessed by a third party to file weekly certifications and/or divert funds. Upon receipt of this form, the Department will initiate an investigation and issue a determination. Depending on volume, it may take several weeks to complete the investigation. If additional information is needed, the Department will contact you. For more information about identity theft, please visit our website: [www.dew.sc.gov/individuals/unemployment-insurance-fraud](http://www.dew.sc.gov/individuals/unemployment-insurance-fraud).*

*The phrase "week ending" in this form refers to the Saturday of the week of unemployment. Please fill this form out completely, accurately, and legibly.*

FIRST NAME: \_\_\_\_\_ LAST NAME: \_\_\_\_\_

LAST 4 DIGITS OF SOCIAL SECURITY NUMBER: \_\_\_\_ \_ \_ \_

ADDRESS (number and street, city, state, and ZIP code): \_\_\_\_\_

TELEPHONE NUMBER: ( \_\_\_\_ ) \_\_\_\_ - \_\_\_\_ \_

E-MAIL ADDRESS: \_\_\_\_\_

**I wish to report the following to the South Carolina Department of Employment and Workforce**  
**(Please check all that apply):**

- I did not file or attempt to claim unemployment benefits with the information above.
- I wish to file a claim for unemployment benefits in my name and cannot do so because someone else has opened a claim using my personal information.
- I filed a claim and weekly certifications for unemployment benefits, but there are weeks when payments were neither made to the account I designated for direct deposit, nor deposited onto my UI benefits debit card.

Those weeks (ending on Saturday) and amounts of payment are:

Week ending: \_\_\_\_\_ Amount: \_\_\_\_\_

Week ending: \_\_\_\_\_ Amount: \_\_\_\_\_

Week ending: \_\_\_\_\_ Amount: \_\_\_\_\_

*(please use page 3 if additional weeks apply)*

The account I designated for direct deposit (if applicable) is:

Bank Name: \_\_\_\_\_

Last 4 Bank Numbers on Bank Account: \_\_\_\_ \_ \_ \_

The last 4 numbers on my Benefits Debit Card Number *(if applicable)* are: \_\_\_\_ \_ \_ \_

I filed a claim for unemployment benefits and at some point after I stopped filing, my claim was reopened without my consent and weekly certifications were filed on my behalf.

Week ending: \_\_\_\_\_ Were payments issued?  Yes  No

Week ending: \_\_\_\_\_ Were payments issued?  Yes  No

Week ending: \_\_\_\_\_ Were payments issued?  Yes  No

Week ending: \_\_\_\_\_ Were payments issued?  Yes  No

*(please use page 3 if additional weeks apply)*

If payments were made when the claim was reopened, were they deposited into your direct deposit account or UI Benefits debit card?  Yes  No

Are you aware of who used your personal information to file for benefits in your name, reopened your claim and/or diverted payments?  Yes  No

If you selected yes, please provide the individual's name: \_\_\_\_\_

Certification: I certify that the information I have reported is true and correct. I understand that if I intentionally make a false statement, misrepresent facts or conceal material information to obtain benefits, I may be required to repay benefits, charged penalties and could be subject to criminal prosecution.

Signature: \_\_\_\_\_ Date: (month, day, year): \_\_\_\_\_

Printed Name: \_\_\_\_\_

***Please mail or email this form and any supporting documentation to the following:***

**South Carolina Department of Employment and Workforce  
Integrity Division  
PO Box 995  
Columbia, SC 29202  
[Fraud.Reporting@dew.sc.gov](mailto:Fraud.Reporting@dew.sc.gov)**

**Statement of Non-Receipt of Unemployment (UI) Benefits**  
**(Continuation Page)**

*(continued)* I filed a claim and weekly certifications for unemployment benefits, but there are weeks when payments were neither made to the account I designated for direct deposit, nor deposited onto my UI benefits debit card.

Those weeks (ending on Saturday) and amounts of payment are:

Week ending: _____	Amount: _____
Week ending: _____	Amount: _____
Week ending: _____	Amount: _____
Week ending: _____	Amount: _____
Week ending: _____	Amount: _____
Week ending: _____	Amount: _____
Week ending: _____	Amount: _____
Week ending: _____	Amount: _____
Week ending: _____	Amount: _____
Week ending: _____	Amount: _____

*(continued)* I filed a claim for unemployment benefits and at some point after I stopped filing, my claim was reopened without my consent and weekly certifications were filed on my behalf.

Week ending: _____	Were payments issued? <input type="checkbox"/> Yes <input type="checkbox"/> No
Week ending: _____	Were payments issued? <input type="checkbox"/> Yes <input type="checkbox"/> No
Week ending: _____	Were payments issued? <input type="checkbox"/> Yes <input type="checkbox"/> No
Week ending: _____	Were payments issued? <input type="checkbox"/> Yes <input type="checkbox"/> No
Week ending: _____	Were payments issued? <input type="checkbox"/> Yes <input type="checkbox"/> No
Week ending: _____	Were payments issued? <input type="checkbox"/> Yes <input type="checkbox"/> No
Week ending: _____	Were payments issued? <input type="checkbox"/> Yes <input type="checkbox"/> No
Week ending: _____	Were payments issued? <input type="checkbox"/> Yes <input type="checkbox"/> No
Week ending: _____	Were payments issued? <input type="checkbox"/> Yes <input type="checkbox"/> No
Week ending: _____	Were payments issued? <input type="checkbox"/> Yes <input type="checkbox"/> No
Week ending: _____	Were payments issued? <input type="checkbox"/> Yes <input type="checkbox"/> No
Week ending: _____	Were payments issued? <input type="checkbox"/> Yes <input type="checkbox"/> No