



ADAMS COUNTY

Pennsylvania



FRAUD HOTLINE SUBMISSION FORM

Please include as much detailed information in your fraud tip as possible

Name(s) of person(s) suspected of committing fraud:

Department or function where fraud is occurring:

Date(s) and/or duration of occurrence(s):

Approximate dollar amount/value involved:

Name(s) of any other witness(es) who could provide details:

Detailed description of fraud:

May we contact you?
(Please include your name and contact information)

- Note:**
1. Download the PDF form and complete it in Adobe Reader
 2. Or use Internet Explorer
 3. After downloading or using Internet Explorer, complete the form then click Submit