

AFFIDAVIT OF FRAUD

State of _____

:SS

County of _____

_____ being duly sworn, deposes and says:

1. My mailing address is _____

My telephone number at home is (_____) _____ and at work is (_____) _____

2. My Visa/MasterCard credit/debit card ("Card") was issued by _____
Credit Union and the account number is _____.

3. I was issued _____ Card(s) in my name.

4. The following other persons were issued cards in their names with the same account number as my Card:

5. To the best of my knowlodge, my Card was: (check one of the following)

Lost Stolen on or about _____
Mo. Day Year

Never Received

In my possession at all times when the fraudulent transactions occurred, and I learned of the fraud
on or about _____
Mo. Day Year

6. I reported my Card lost/stolen on _____

7. The transactions ("Transactions") listed on the back side of this form were not made or authorized by me or
made by any person who was authorized to use my Card or, to the best of my knowledge, made by any person
listed in Section 4 above. (Please list all unauthorized transactions on the reverse side.)

8. I did not receive any benefit from the Transactions listed in Section 7 above.

9. I have have no knowledge of the identity or characteristics of the person(s) illegally using my name,
account number, or Card. If you have such knowledge, please provide information on the reverse side.

10. I give my consent to the Credit Union to release any information regarding my Card and/or Card Account to
any federal, state, or local law enforcement agency so that the information can, if necessary, be used in the
investigation and/or prosecution of any person(s) who may be responsible for fraud involving my Card and/or
Card Account.

PLEASE SIGN BELOW AND PROVIDE ADDITIONAL SIGNATURE SAMPLES ON THE REVERSE SIDE.

Signature: _____

Subscribed and sworn to before me on this _____ day of _____, 20 _____
_____ (seal) Notary Public

My Commission Expires _____

AFFIDAVIT OF FRAUD

List of All Unauthorized Transactions:

Posting Date	Amount	Merchant Description

Please provide five (5) examples of your signature below:

In the space below, provide any information you have about the person who illegally used your account number or Card.
