

Affidavit

Fraudulent Use of a VISA Credit, A.T.M or Check Card.

Credit card

ATM Card

Check Card

I make this affidavit for the purpose of establishing the fraudulent use of my card. I did not give, sell or trade my credit/ATM/check card to anyone nor did I give anyone permission to use my card(s). I have no knowledge that my spouse or minor children made any transaction(s) on or after the date of the first fraudulent transaction indicated below. I did not receive any benefit from the unauthorized use of my credit/ATM/ check card.

Name: _____

Mailing Address: _____

Home Phone: _____

Work Phone: _____

No. of Cards Issued: _____

Card Account #: _____

Date Loss Discovered: _____

Date Loss Reported to Credit Union: _____

Date of First Fraudulent Transaction: _____

Type of Card Loss: Lost Stolen Never Received In my Possession at all times when fraud occurred

List Unauthorized Transactions Below:

Merchant Name	Date	Amount

I give my consent to the credit union to release any information regarding my card and or card account to any local, state and/or federal 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. Further, I understand I may be required to comply with a court order or subpoena to give testimony. I swear this affidavit is true and understand that making a false sworn statement is subject to federal and/or state statutes and may be punishable by fines and/or imprisonment.

NOTICE: Any person who knowingly and with intent to injure, defraud or deceive any insurance company, submits a statement of claim containing any false, incomplete or misleading information commits a crime.

State of _____

Country of _____

Member's Signature

Subscribed and sworn to me before this

_____ day of _____, 20____.

Co-Applicant/ Authorized Signer

(Notary Public)