

# Affidavit of Fraud & Member Statement Form



I. Type of Claim		
<b>PLASTIC CARD CLAIM</b>	PS Case Reference Number	Date Reported
<b>Pin Based Fraud</b> (POS Debit or ATM withdrawals where PIN number was used to perform the transaction) The card was <input type="checkbox"/> Lost <input type="checkbox"/> Stolen <input type="checkbox"/> In my possession <input type="checkbox"/> Never received		
<b>Signature Based Fraud</b> (Credit Transactions or receipt was signed at the merchant) The card was <input type="checkbox"/> Lost <input type="checkbox"/> Stolen <input type="checkbox"/> In my possession <input type="checkbox"/> Never received		
Cardholder Comments:		

II. Member & Claim Information					
Name	Checking Account Number	Home Phone	Alternate Phone		
Mailing Address	City	State	Zip	Last 4 of Card Number	
Date Loss Discovered	Date Loss of Funds Reported to Financial Institution	Date of First alleged Fraudulent Transaction		Location of Pin	
Suspect Name (if any)	Your relation to the suspect	Description of Suspect	Police Report # (Pin based claims)		

Transaction Description or Merchant Name or Location	Network ID	Date	Amount	ISA Fee	Reference
<b>TOTAL</b>					

**III. Member Statement, Signature**

I make this affidavit for the purpose of reporting the fraudulent use of my account and resulting loss.

*I understand that any person who knowingly and with intent to injure, defraud, or deceive any financial institution, files a statement of claim containing any false, incomplete, or misleading information, is guilty of a felony of the third degree and can be prosecuted for such. Initial or check for all types of claims (Plastic Card Claim)*

*I make this statement for the purpose of establishing the fraudulent use of my ATM or credit/debit card. I did not give, sell, or trade my ATM or credit/debit card to anyone nor did I give anyone permission to use my card(s). I have no knowledge that my spouse, child, or relative is/may be involved in performing the transaction(s) indicated. I did not receive benefit from the unauthorized use of the card(s) in question. Initial or check for all types of claims (Plastic Card Claim)*

*I understand that it is my obligation to provide and/or fully execute all required information or forms including full Police Report as requested (for Pin based plastic claims), signed affidavit and valid government issued identification. If I fail to provide or execute the information required to make the claim, it will be denied: if I reported the alleged loss of funds by phone, I must provide/execute the required forms and ensure that they are received by my Financial Institution no later than 10 business days from the date that I*

**Member's description of incident in own word:**

Member Signature
Member Signature
Member Signature
Member Signature
Member Signature

Secondary Cardholder's Signature (if applicable for Signature Based Plastic card fraud)
Authorized User's Signature (if applicable for Signature Based Plastic card fraud)