

8. Check applicable statements and fill in information:

The person notified at the Credit Union was _____,

_____ I notified the Credit Union my card was lost/stolen on _____, 20____
By: Phone _____ Visit to Branch _____ Mail _____.

_____ I notified the Credit Union of unauthorized transactions on _____, 20____
By: Phone _____ Visit to Branch _____ Mail _____.

_____ I normally kept my card in _____ (wallet, desk, etc.)

My PIN was kept _____ (where)

_____ I have had a recent change of address after which a new card and PIN may have been mailed to a prior address ____ yes ____ no.

Circumstances pertaining to lost/stolen card, and/or unauthorized ATM/Debit Card transactions have been reported to the police ____ yes ____ no.

Note: We may ask you to file a police report if you have not already done so.

If yes, complete the following:

Officer name, Department and Assignment _____

Report or File number _____ Card recovered _____

If an arrest was made, case number _____

Name and address of person(s) arrested

9. The transactions listed below were not made by me or authorized by me.

Date	Amount	Merchant Name
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

10. I have not made my card or pin available to anyone other than the following person(s):

Name _____ Relationship _____

Address _____ Telephone _____

Name _____ Relationship _____

Address _____ Telephone _____

11. I have neither received nor benefited from the proceeds of the unauthorized transactions nor to the best of my knowledge have any of the persons listed in paragraph 10 received or benefited from them.

12. I will cooperate in the prosecution of the person(s) improperly using my card.
This statement is made for submission to the Credit Union for use as part of its investigation of my claim that my account (s) should not be debited for the transactions listed above. I hereby authorize Credit Union investigators and law enforcement officials to investigate all circumstances concerning these transactions.

I am aware that improperly obtaining funds from AB&W Credit Union Inc. by fraudulent use of an ATM/Debit card may constitute a federal criminal offense, punishable by imprisonment and/or a fine, and that any false statements made to any Credit Union investigator or law enforcement official in connection with an investigation may constitute evidence of such a crime. I certify under penalty of perjury that all of the statements I have are true and correct.

Date

Signature

Please attach any documentation supporting your claim (bank statements, receipts, police reports, etc.)

Credit Union Use Only:

Teller Name

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