

Affidavit of Fraud (MasterCard Debit Card)

This Affidavit of Fraud form should be completed if someone used your debit card or debit card number to make transaction without your knowledge or permission. You did not give your card number to the merchant of authorize anyone to perform transactions with the merchant. The card number will be closed to prevent additional fraud from occurring. The cardholding member must be the person who completes this form.

Name:		
Member number:		
Card number:		
Contact telephone number:		
Card was: Lost	Stolen Never received	In my possession at all times when fraud occurred
Date loss was discovered: Date loss reported to credit union:		
List Unauthorized Charges: (attach additional sheet if necessary)		
Date	Amount	Merchant
Name and address of Unauthorized User (if known):		
Authority contacted and case number, if applicable:		
I make this affidavit for the purpose of establishing the fraudulent use of my card. I did not give, sell, or trade my card, 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 transactions. I did not receive any benefit from the unauthorized use of my card. I give my consent to the credit union to release any information regarding my card and/or card account to 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 may be punishable by fines and/or imprisonment.		
Cardholder Signature: Date:		