

Affidavit of Check Fraud

I make this affidavit for the purpose of establishing the fraudulent use of my Credit Union of Southern California, a Federal Credit Union (CU SoCal) account as indicated below. I did not give, sell or trade information to anyone representing the fraud, nor did I give anyone permission to use my account or my identity. I have no knowledge that my spouse or minor children made any transaction(s) or fraudulent transaction(s) indicated. I did not receive any benefits from the unauthorized use of my account.

THE MEMBER ALLEGING FRAUD MUST COMPLETE THIS FORM IN LONGHAND

MEMBER INFORMATION Account Number _____

<input type="checkbox"/> Signature Forged <i>My signature on the front of the check listed below is a forgery. I did not sign the check and I did not authorize the signature</i>	<input type="checkbox"/> Endorsed Forged <i>My endorsement on the back of the check listed below is a forgery, missing or not as drawn. I did not endorse the check and I did not authorize the endorsement.</i>	<input type="checkbox"/> Counterfeit <i>The check listed below is an imitation of check drawn on my account. I did not create, sign or authorize the creation or signature of this check.</i>	<input type="checkbox"/> Altered/ Unauthorized <i>The check listed below has unauthorized alteration(s) and/or amount. I did not alter the payee or the amount, nor have I directly or indirectly authorized anyone to make alterations to this check.</i>	<input type="checkbox"/> Unauthorized Remotely Created Check <i>The check listed below was not authorized. I did not authorize the payee or the payee's collecting agent to process a remotely created check against my account.</i>
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Drawn on (Name of Institution the item is payable through): _____

Check#:	Check Date:	Posting Date:	Amount*:
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Payable to: _____

If check was altered, please include original "written as" information:

Check Date:	Amount:	Payee:
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*If this claim is for \$200.00 or more a copy of the Police Report must be provided:

Police Report filed: No Yes If Yes, Date file: _____ Report Number: _____

Do you believe you know who committed this fraud? No Yes If Yes, Please provide details: _____

DECLARATION:

_____ I did not receive any benefit or value from the proceeds of the check nor were any proceeds applied to any use or purpose on my behalf, and
Initials

_____ I have not arranged with the person(s) who misused the item to be reimbursed for any proceeds of the check, and
Initials

_____ I promise to testify or certify to the truth of applicable statements in this Declaration before any competent judge, officer of the court or other person, in any case now pending or which may occur regarding this Declaration.
Initials

_____ I understand this forgery is subject to investigation by local, state and/or federal law enforcement agencies and that I may be required to assist in the prosecution of suspects. I give my consent to the credit union to release information regarding my account to these agencies. I understand that making a false sworn statement is subject to federal and/or state statutes and may be punishable by fines and/or imprisonment.
Initials

For your protection California law requires the following to appear on this form: Any person who knowingly presents a false or fraudulent claim for the payment of a loss is guilty of a crime and may be subject to fines and confinement in state prison.

I am making this statement voluntarily. I am willing to give further testimony in a court of law about this matter, as requested by Credit Union of Southern California, a Federal Credit Union (CU SoCal). I swear under penalty of perjury under the laws of this state that the foregoing is true and correct. My signature has been guaranteed by a notary public as certified below:

Member's Signature (Please sign your name three times) :	1.
2.	3.

Notary Information

A notary public or other officer completing this certificate verifies only the identity of the individual who signed the document to which this certificate is attached, and not the truthfulness, accuracy, or validity of that document.

State of _____ County of _____ <div style="text-align: center;"><small>(Seal)</small> Place Notary Seal Above</div>	Subscribed and sworn to (or affirmed) before me on this _____ day of _____, 20____ _____ proved to me on the basis of <small>Name(s) of Signer(s)</small> satisfactory evidence to be the person(s) who appeared before me. Signature _____ <div style="text-align: right;"><small>Signature of Notary Public</small></div>
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