



## Declaration of Unauthorized ATM Use

Name \_\_\_\_\_ Joint Account Holder \_\_\_\_\_  
Account No. \_\_\_\_\_ Card No. \_\_\_\_\_  
Phone No. \_\_\_\_\_

The undersigned hereby declares that the checking/savings statements have been carefully examined and that the following described transactions were not made by the joint account holder or me.

Transaction Date	Amount	Transaction Type	Location of ATM
_____	\$ _____	_____	_____
_____	\$ _____	_____	_____
_____	\$ _____	_____	_____

COMPLETE ALL INFORMATION

The undersigned had possession of the ATM/Check card indicated above at the time the described transaction(s) took place.  Yes  No

PIN was written on card or on other document close to where card was kept?  Yes  No

The ATM/Check card indicated above was lost/stolen on \_\_\_\_\_ and the loss/theft was reported to Certified Federal Credit Union on \_\_\_\_\_. The circumstances of the loss/theft were as follows:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

The undersigned gave the ATM/Check card and/or permission to use this card on a previous occasion to the following individual: \_\_\_\_\_

Name \_\_\_\_\_

\_\_\_\_\_ Address \_\_\_\_\_ City \_\_\_\_\_ ST \_\_\_\_\_ ZIP \_\_\_\_\_

I have knowledge of the circumstances surrounding the unauthorized transaction(s).  Yes  No

I have knowledge of the person(s) who conducted the unauthorized transaction(s).  Yes  No

I have recently responded to an e-mail requesting card and/or PIN verification?  Yes  No

Following is a brief explanation of what I know regarding the circumstances and/or person(s) surrounding the transactions(s). \_\_\_\_\_

I DECLARE UNDER PENALTY OF PERJURY THAT THE FOREGOING IS TRUE AND CORRECT. I WILL ALSO COOPERATE WITH CERTIFIED FEDERAL CREDIT UNION DURING THE FRAUD INVESTIGATION.

\_\_\_\_\_  
Member Signature \_\_\_\_\_ Date \_\_\_\_\_

\_\_\_\_\_  
Joint Account Holder Signature \_\_\_\_\_ Date \_\_\_\_\_

BOTH SIGNATURES REQUIRED FOR JOINT ACCOUNTS

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