Certified Federal
CREDIT UNION

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 FAX 626.350.1400

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