



## Fraudulent Card Transaction Resolution Claim

The **SAFE Visa Card** associated with the fraudulent transactions will be canceled immediately, if not done so already, upon receipt of your completed Fraudulent Card Transaction Resolution Claim. This entire form must be completed where applicable and **SIGNED** by the cardholder, then returned to SAFE Credit Union.

<b>Part I</b>	
Cardholder Name	Card Number
Home Phone	Work Phone
Date Reported to SAFE	Contact me by
Email Address	

<b>Part II</b>
<p>I, _____, residing at _____, state to the best of my knowledge that the above-referenced SAFE Visa Card was <b>(please mark only one appropriate selection)</b>:</p> <p><input type="checkbox"/> <b>Used Unauthorized:</b> I had my SAFE Visa Card in my possession when my account number was fraudulently used.</p> <p><input type="checkbox"/> <b>Lost: Date Card Lost</b> _____. I have not used the SAFE Visa Card identified above for the purchase of merchandise or services, to withdraw cash, or for any other purpose since the above date.</p> <p><input type="checkbox"/> <b>Stolen: Date Card Stolen</b> _____. I have not used the SAFE Visa Card identified above for the purchase of merchandise or services, to withdraw cash, or for any other purpose since the above date.</p> <p><input type="checkbox"/> <b>Never Received in the Mail:</b> I requested a SAFE Visa Card from SAFE, but never received the card in the mail.</p> <p><input type="checkbox"/> <b>Never Requested:</b> I never requested a SAFE Visa Card from SAFE.</p> <p>I Certify:</p> <ul style="list-style-type: none"> <li>• I did not use and did not authorize anyone else to use my card for the fraudulent transactions identified.</li> <li>• I did not receive any value or benefit in connection with the fraudulent transactions.</li> <li>• I have made available all information and suspicions I have about the fraudulent transactions, including any information regarding the identity of the person who wrongfully used my card for the fraudulent transactions.</li> <li>• The information in this Fraudulent Card Transaction Resolution Request transmission is true and correct.</li> </ul> <p>I authorize and agree to:</p> <ul style="list-style-type: none"> <li>• SAFE Credit Union sharing the provided information with law enforcement, banking regulators, and other third parties in connection with any investigation of the fraudulent transactions, including any criminal investigation.</li> <li>• Cooperate in any such investigation and in the prosecution of any person believed to be responsible for fraudulently using my card.</li> </ul> <p>In the event additional charges are identified subsequent to the completion of this affirmation, I authorize SAFE to add those subsequent transactions to this affirmation.</p> <p>Cardholder Signature (required)</p> <p><b>X</b></p>

<b>Part III</b>	
<p><b>The transaction(s) identified were not made by me nor by anyone acting upon my authority or with my consent or knowledge.</b></p>	<p><input type="checkbox"/> I have no knowledge of the identity or whereabouts of the person(s) using the card.</p> <p><input type="checkbox"/> I can identify the suspect as:</p> <p>Name _____</p> <p>Address _____</p> <p>Phone No. _____ Relationship to cardholder _____</p>

