

Affidavit of Fraud

Name: _____

Address: _____

Email/Telephone Number: _____

Account Number: _____

Type: Identity Theft Account Takeover Loan Fraud Wire Fraud Other: _____

Description of Activity: If needed, additional information may be attached.

Please list fraudulent transactions with dates and amounts.

Type	Date	Amount	Notes/Comments

Do you know who perpetrated the fraud? Provide name, address, relationship, etc.

I have examined all of the unauthorized transactions and in each instance I did not originate the transaction(s) nor authorize them. Further, I did not receive any of the proceeds or benefits of any such item(s) on the below total. I understand that Tower Federal Credit Union will conduct an investigation into the claims made in this affidavit and I agree to fully cooperate with Tower and/or any law enforcement agency in their efforts to pursue any civil or criminal actions against any person associated with the above activity. I understand that if I refuse to cooperate, I will forfeit any right to reimbursement from Tower.

Total amount of unauthorized transactions: _____

_____ Attach copy of government issued photo identification and other documents referenced above.

I give my consent to the credit union to release any information regarding my account to any 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 account. I swear this affidavit is true and understand that making a false sworn statement is subject to federal and/or state statutes and may be punishable by fines and/or imprisonment.

Affiant Name

Affiant's Signature Today's Date

ASWORN AND SUBSCRIBED before me, the undersigned authority, on the _____ day of _____, _____

[Notary Seal]

(Notary Public)

State of:

My commission expires: _____

