



Affidavit of Negotiable Instrument

Member/Claimant Name: _____
Member/Claimant Address: _____
City: _____ State: _____ Zip: _____
Phone: _____ Account Number: _____
Check#: _____ Posting Date: _____ Amount: \$ _____
Payable To The Order Of: _____

PLEASE NOTE: You may complete more than one section if an item has been misused in more than one way. (i.e., if someone altered the payee’s name and altered the amount) Please complete a separate page 2 for each item selected. Member must initial claim type. (Check Tran Codes: 60, 62, 63, or 65)

Maker’s Signature Forged

The maker’s signature of _____ on the item listed above, and examined by me, is a forgery. I did not sign the item nor did I authorize any other person to sign my name on the item.
_____ (Initial here)

Endorsement Forged

The endorsement of _____ on the item listed above, examined by me, is a forgery. I did not endorse the item nor authorize any other person to endorse the item on my behalf.
_____ (Initial here)

Check Amount Altered

The amount of the above item was altered from the original amount of \$ _____ to \$ _____. I did not alter the amount of the item nor authorize the altering. I received no benefit from the altered item in excess of the original amount, nor was any part of the excess amount applied to any use or purpose on my behalf.
_____ (Initial here)

Payee Name Altered

The payee’s name on the above described item has been changed. This was originally made payable to _____ and was altered to make it payable to _____. I did not alter the payee’s name nor did I authorize the alteration.
_____ (Initial here)

Unauthorized Check Draft

I did not authorize a draft on my account for the item listed above.
_____ (Initial here) (Each account holder must sign if this claim is made)

Missing Endorsement or Improper Endorsement

Payee on the above-described item did not receive the funds nor benefit from this item.
_____ (Initial here)

Counterfeit Check

The following check bearing my account information is a replication that was not issued by me. (Check clearing account that is not member’s original check stock or that does not have member’s info for the maker information)
_____ (Initial here)

Unauthorized Teller Withdrawal

The signature of _____ Date of Fraudulent Transaction: _____ on the withdrawal slip(s), examined by me is a forgery. I did not sign the withdrawal slip(s) nor did I authorize any other person to sign my name to withdraw funds from the account.
_____ (Initial here)

Unauthorized CallPlus or myBranch Transaction Date of Fraudulent Transaction: _____
I did not process nor did I authorize anyone to complete the following transaction _____ (describe) for the amount of _____
(Notate the transaction code) _____
_____ (Initial here)

Description of Incident: The following description contains all the information that I have concerning the above claim. If, at a later date, I obtain any additional information about the incident, I will notify SECURITY SERVICE FEDERAL CREDIT UNION immediately. As part of the description, please provide the name(s) and any other identifying factors of any person believed to have knowledge of or to have contributed to the claim or any loss suffered. Explain with details of person using name(s) address, DOB, etc. Also, explain (in detail) events of the incident. (Member to complete)

Police Report: (If applicable)
Case # _____

Account Closed:
 YES _____ (date) New Account number: _____

INFORMATION (must be completed)

Employee completing affidavit: _____ Branch: _____ Date: _____

State of
County of

I, _____, hereby state that the attached statement dated _____, is true and accurate to the best of my knowledge. I understand that this matter is subject to investigation by Security Service Federal Credit Union, and/or local, state or federal law enforcement 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. I, _____, have made this statement voluntarily and without duress.

Signature

Date

Notary Public

My Commission Expires