



Affidavit of Forgery, Unauthorized or Altered

Member Name:

Account Number :

Transaction Details:

Date:	Amount:	Check Number:	Payee:
Date:	Amount:	Check Number:	Payee:
Date:	Amount:	Check Number:	Payee:
Date:	Amount:	Check Number:	Payee:
Date:	Amount:	Check Number:	Payee:
Date:	Amount:	Check Number:	Payee:

FORGED ENDORSEMENT. That I am the named payee on the below mentioned check; That I did not endorse the check personally, nor was it endorsed by anyone at my request or with my knowledge, consent, or understanding; nor have I received any proceeds or benefits whatsoever from the check, either directly or indirectly.

COUNTERFEIT ITEM. That the check(s) are counterfeit(s) as said check(s) bearing my account information is/are a replication that was not issued by me.

FORGED SIGNATURE OF MAKER. That I did not sign the check or savings withdrawal as maker personally, nor was it signed by anyone at my request or with my knowledge, consent, or understanding; nor have I received any proceeds or benefits whatsoever, either directly or indirectly.

MISSING/IMPROPER ENDORSEMENT. That I am the person named as the payee of said check(s)/withdrawal(s) and I never received any of the proceeds thereof or benefited in any way from the proceeds.

ALTERATION. That the check issued was changed after it left my possession and that the alteration was made without my knowledge, consent, or understanding; nor have I received any proceeds or benefits whatsoever, either directly or indirectly from the alteration.

Date the error was first noticed

Was the Credit Union previously notified? If so, when and where?

I offer the following explanation concerning the negotiation of this instrument. (If none, state 'none').

I agree to assist USC Credit Union and appropriate law enforcement authorities in any investigation and if needed, be a witness in any hearing, proceeding or action brought against the person(s) responsible for the forgery, alteration or unauthorized draft. I have accurately and fully reported to USC Credit Union all the information, knowledge, or facts that I possess concerning the forgery, alteration or unauthorized draft and should anything else concerning the forgery, alteration or unauthorized draft come to my attention, I will immediately report it to USC Credit Union. Under penalty of perjury, I affirm that the information in this affidavit is complete, true and correct. This affidavit is made voluntarily and for the purpose of establishing the claim of forgery.

Member Signature: _____ **Date Signed:** _____

A notary public or other officer completing this certificate verifies only the identity of the individual who signed the document to which this certificate is attached, and not the truthfulness, accuracy, or validity of that document.

Subscribed and sworn to (or affirmed) before me on this _____ day of _____, 20_____.

by _____ and _____ proved to me on this basis of satisfactory evidence to be the person(s) who appeared before me.

Notary Public's Signature: _____

My commission expires:

(NOTARY SEAL OR CONSULATE STAMP)