



Cardholder Dispute Form Fraudulent Use of a Debit Card

I make this Cardholder Dispute Form for the purpose of establishing the fraudulent use of my card. I did not give, sell or trade my debit card to anyone nor did I give anyone permission to use my card(s). I have no knowledge that my spouse or minor children made any transaction(s) on or after the date of the first fraudulent transaction indicated below. I did not receive any benefit from the unauthorized use of my debit card.

Name _____ Home Phone _____

Date Discovered Loss _____ Date Reported Loss to Credit Union _____

Account Number _____ Card Number _____

Note: Please initial appropriate type of card loss as applicable to each member affected.

Type of Card Loss:	Member's Initials	Joint Member's Initials
___ Lost	_____	_____
___ Stolen	_____	_____
___ Never Received	_____	_____
___ Card in my possession	_____	_____

Posting Date _____	Amount \$ _____	Merchant _____
Posting Date _____	Amount \$ _____	Merchant _____
Posting Date _____	Amount \$ _____	Merchant _____
Posting Date _____	Amount \$ _____	Merchant _____

Total amount of unauthorized transactions: \$ _____

I did not use this card nor authorize the use of this card by anyone else after I discovered the plastic card was lost, stolen or counterfeited.

I have examined all of the unauthorized transactions and in each instance I did not originate the transaction nor authorize it. *Please provide details (if necessary) on a separate sheet.*

I give my consent to the credit union to release any information regarding my card and/or card 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 card and/or card account. I swear this Cardholder Dispute Form 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.

Member's Signature _____ Date _____

Co-Member/Authorized Signature _____ Date _____