

AFFIDAVIT OF FORGERY OR FRAUDULENT USE



Account Information

ACCOUNT NUMBER

Affiant Information

MEMBER NAME (AFFIANT #1)

MEMBER NAME (AFFIANT #2)

STREET ADDRESS

CITY

STATE

Declaration

I / We, as Affiant / Claimant, declare that the box initialed below and the statement following the initialed box are true.

INITIALS

Maker Signature Forged

My (maker) signature on the face of this check(s) is/are a forgery. I did not sign the check(s) or authorize the signature.

INITIALS

Forged Endorsement/Missing Endorsement/Not Endorsed as Drawn

The payee alleges they did not receive credit for the funds of the item(s) cashed and did not endorse, authorize, or otherwise approve the endorsement on the back of the referenced check(s).

We recommend that the payee complete the Affidavit Addendum for Forged Endorsement Claims and return it to BECU. While submitting the addendum may assist in the recovery of funds, please note that BECU cannot guarantee recovery.

INITIALS

Counterfeit/Fictitious Check(s)

The check(s) is/are an imitation of a check drawn on my account using my account information. I did not create, sign, or authorize the creation of the check(s).

INITIALS

Altered Amount/Payee Name Alteration

I (maker) did not alter the check or grant permission to alter this check. The following alteration(s) were made from the original:

Original Payee Name: _____

Original Amount: _____

Altered Payee Name: _____

Altered Amount: _____

Attach a carbon copy of the unaltered check or invoice. For multiple altered checks, submit separate claims for each.

INITIALS

Unauthorized Remotely Created Check (RCC)

The remotely created check(s) that was/were drawn from my account was/were not authorized. No owner or authorized signer on the account provided checking account information for purposes of authorizing creation of the listed check(s). No owner or authorized signer has received any benefit from the payment of the check(s). The person who issued the remotely created check is not authorized to use the account.

Check Information

CHECK NUMBER

DATED

AMOUNT

NAME OF MAKER

NAME OF PAYEE

CHECK NUMBER

DATED

AMOUNT

NAME OF MAKER

NAME OF PAYEE

AFFIDAVIT OF FORGERY OR FRAUDULENT USE



CHECK NUMBER	DATED	AMOUNT
NAME OF MAKER	NAME OF PAYEE	
CHECK NUMBER	DATED	AMOUNT
NAME OF MAKER	NAME OF PAYEE	
CHECK NUMBER	DATED	AMOUNT
NAME OF MAKER	NAME OF PAYEE	

Law Enforcement Information

LAW ENFORCEMENT AGENCY NAME	LAW ENFORCEMENT CASE NUMBER
-----------------------------	-----------------------------

Please describe the circumstances under which this fraud or forgery occurred.

Acknowledgement

I / We have not received any part of the proceeds from this check / plastic card and will not benefit in any way whatsoever, directly or indirectly, from this forgery and / or fraudulent transaction.

I / We authorize the Boeing Employees' Credit Union or any other victim of these actions outlined above to initiate criminal proceedings against the individual(s) that have forged or defrauded my/our name. If I / we at any time receive any restitution for this claim, I / we will promptly remit the funds to Boeing Employees' Credit Union (BECU). I / We recognize that false statements made in this affidavit with the knowledge of their falsity may subject me / us to civil liability and criminal penalties.

By signing this form, I authorize BECU to disclose any and all information associated with this claim / incident, which may include account data, to law enforcement for the purposes of the investigation.

Signature(s)

SIGNATURE OF AFFIANT #1	DATE
SIGNATURE OF AFFIANT #2	DATE

Notary Public

STATE OF	SWORN BEFORE ME THIS DAY OF	NOTARY SEAL
COUNTY OF		
NAME OF NOTARY (typed or printed)		
RESIDING AT		
NOTARY PUBLIC'S SIGNATURE	MY COMMISSION EXPIRES	