

Affidavit of Unauthorized Use

This form can be mailed or faxed to 678-375-6096.

Credit Card Center
Attention: Chargeback Department
PO Box 183258
Columbus, OH 43218-3258

I/we, in the country of _____, state of _____, herein declare that; as of ____ / ____ / ____ my/our credit card with Teachers Federal Credit Union was: month day year

- Lost
- Stolen
- Never received in the mail
- Account number used fraudulently/credit cards in my possession

Please provide an explanation of how you think these charges were made:

Credit Card Account Number: _____

Primary Cardholder Name: _____

Primary Cardholder Address: _____

Home Phone Number () _____ Work Phone Number () _____

List name and address of all authorized users on your account:

_____.

Location card(s) lost/stolen _____

City _____ State _____

How was your card lost/stolen? _____

_____.

Was a Police Report filed? _____ If yes, list the Report Number _____

Are there unauthorized charges? _____ **IF YES, INCLUDE A COPY OF YOUR BILLING**

STATEMENT AND CIRCLE THE DISPUTED CHARGES.

Was the back of the card signed? _____

List the name and address of the person(s) you believe may have made these unauthorized charges

_____.

Are you familiar with the merchant(s) where the card was used? _____

If yes, please explain _____

_____.

Additional information to assist with investigation _____

_____.

I/we believe that all charges made after the above reported date of my card account number and bearing my signature or the signature of person(s) authorized to use my card account number following the date reported above, are and will be forgeries.

I/we further agree that any information relating to the unauthorized use of this account may be provided to an investigative or prosecutorial agency.

I/we declare that the above is true and correct.

Primary cardholder's signature: _____ Date: _____

Authorized user's signature: _____ Date: _____

Authorized user's signature: _____ Date: _____

Authorized user's signature: _____ Date: _____

Witnessed by: _____ Date: _____

This affidavit, being signed does not require notarization.

If you have any questions please do not hesitate to contact us at 1-855-462-5880.