



Credit Union Declaration of Forgery/Fraud



You can submit a request online at <https://www.navyfederal.org/services/security/report-fraud.html> or call 888-842-6328 to submit a claim over the phone. You can also return the completed form to Navy Federal Credit Union, 5550 Heritage Oaks Drive, Pensacola, FL 32526-7859.

This entire form must be completed where applicable, signed by the member, and returned to Navy Federal in order for this claim to be processed. Please provide any documentation you have relating to this claim (e.g., police report, original forged document(s)).

Member Information

Name: First	MI	Last	Suffix	Access No.	Account No.
Mailing Address: Street		City	State		Zip Code
Home Phone No.	Work Phone No.				

Please check the appropriate box below that describes the fraudulent activity and/or instrument(s) altered or forged:

- | | |
|---|---|
| <input type="checkbox"/> Transfer | <input type="checkbox"/> Cash Transfer (for pickup at Western Union Agent) |
| <input type="checkbox"/> Promissory Note (including co-signer/guarantor forgery) | <input type="checkbox"/> Navy Federal Membership Application/Signature Card |
| <input type="checkbox"/> ID Theft (please elaborate in the space provided on the back of this form) | <input type="checkbox"/> Other (specify) _____ |

On the instrument(s), I am named as the (check the appropriate box):

- | | |
|---|--|
| <input type="checkbox"/> Payee/Endorser (on back of loan draft or bottom of withdrawal voucher) | <input type="checkbox"/> Co-signer/guarantor (on loan) |
| <input type="checkbox"/> Signer (on note or face of loan draft) | <input type="checkbox"/> Other (specify) _____ |

Please list all fraudulent transactions and/or forged instruments below:

DATE (MM/DD/YYYY)	TRANSACTION OR INSTRUMENT NUMBER, if applicable (e.g., Transfer No., Loan No.)	DOLLAR AMOUNT
A)		
B)		
C)		
D)		

The transaction(s) or instrument(s) identified above was/were not authorized or signed by me or by anyone acting upon my authority or with my consent or knowledge:

- I have no knowledge of the identity or whereabouts of the person(s) who altered or forged the instrument(s) identified above.
- I can identify the suspect as: Name _____, Address _____, Phone _____, and Social Security Number _____.

I have not received and will not receive any benefits or proceeds from the transaction(s) or instrument(s) identified above. This declaration is made voluntarily for the purpose of establishing the fact that I did not authorize the fraudulent activity that occurred on my account(s) and/or my signature is a forgery and/or the instrument(s) was/were altered without my knowledge.

I understand this forgery and/or fraud is subject to investigation by local, state, and/or Federal law enforcement agencies. I may be required to comply with a court order or subpoena to give testimony.

By signing below, I understand that this declaration may be provided to Federal, state, and local law enforcement agencies for such action within their jurisdiction as they deem appropriate. I understand that knowingly making any false or fraudulent declaration or representation on or with this declaration is subject to Federal and/or state statutes, and may be punishable by fines and/or imprisonment.

Pursuant to 28 U.S.C. Section 1746 and 18 U.S.C. section 1001, I declare under penalty of perjury under the laws of the United States of America that the foregoing is true, correct, and complete.

Signature 	Date (MM/DD/YYYY)
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INCLUDE ANY ADDITIONAL INFORMATION ON BACK.

