Cardmember Service

Fraud Prevention P.O.Box 6355 Fargo, ND 58125-6355

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000034679 1 MB 0.439 106481369583111 P RAYMOND BROCK JANET P BROCK 1126 SOUTHLAWN AVE EAST LANSING MI 48823-3041

Important information about your FlexPerks® Travel Rewards Visa Signature® card Account number ending with: 3329
Dear RAYMOND BROCK and JANET P BROCK:
Please sign and return these two (2) Statement of Fraud forms to the above address by 02/10/16. We have enclosed a return envelope for your convenience.
I, do hereby certify, state and declare under penalty of perjury that the following statement(s) is/are true: (Place an X by the applicable information)
I am claiming that my Credit/Debit Cards were Lost/Stolen. I am claiming that my Credit/Debit Cards were never received. I am claiming that I have my Credit/Debit Cards in my possession and there are Unauthorized Transaction(s) on my account. I am claiming that this account was opened fraudulently. I did not apply for the above referenced account number. I have received no benefit in regard to this account #. I have no knowledge of this account, nor know of any person(s) involved in the obtaining, receiving or signing
If possible provide the following information: Lost/Stolen Date: Date Card Last Used: 1/23 16 - U5 1/24 16 - Set/Leone Pts. Suspect's Name (if Known) Are any other cards or identification items missing/stolen? Y/N Please list items Police Peport filed? Y/N If Yes: Case# Police Dept Phone Number Investigation Officer I never received a Debit/Credit Card in the mail. Y/N Card is in my possession Y/N Card is in my possession Y/N



The creditor and issuer of your credit card is U.S. Bank National Association



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