



Attached is a Statement of Forgery to report unauthorized transactions on your Navy Federal Debit Card/CUCARD®. Please return the Statement of Forgery promptly so that we may resolve your issue in a timely manner. **The Navy Federal Debit Card/CUCARD associated with the fraudulent transactions will be canceled immediately** upon receipt of your completed Statement of Forgery, if it has not been canceled already. If you still have the card in your possession, please destroy it immediately.

For your convenience, the Statement of Forgery is broken down into three sections. In the first section, you will provide the card number that was used fraudulently, your Access Number, and contact information. In the second section, you will provide information regarding how the fraudulent activity may have occurred (e.g., lost card, stolen card, stolen account number) and any information about who may be responsible for the charges. In the third section, you will **list all the fraudulent charges**, to include the amount, date, and merchant name. To expedite your claim, you may **fax the completed form to 703-206-4516**. Otherwise, you may mail it to Navy Federal Credit Union, Card Fraud Prevention Recovery, PO Box 23603, Merrifield, VA 22119-3603. Be sure to make a copy of the Statement of Forgery for your records.

Once Navy Federal has received your Statement of Forgery, it will be assigned to a Fraud Resolution Specialist. Please be aware that the role of a Fraud Resolution Specialist is to pursue reimbursement avenues intended to reduce losses. They do not initiate criminal investigations; however, a Specialist may contact you during the claim process if additional information is needed in reference to your claim. **Please note:** if we determine the charges to be valid, they may be applied back to your account.

The security of your account is our first priority. If you have any concerns or need assistance completing this Statement of Forgery, call toll-free in the U.S. at 1-888-842-6328 or toll-free internationally at 1-800-0-842-6328. Representatives are available 24 hours a day to assist you. If you are enrolled in Navy Federal Online Banking, you may send your questions through **navyfederal.org** by selecting "Account Services" and "Send Us a Message."



Statement of Forgery for Navy Federal Debit Card/CUCARD® Card and Business Debit Card

The Navy Federal Debit Card/CUCARD associated with the fraudulent transactions will be canceled immediately, if not done so already, upon receipt of your completed Statement of Forgery.

| Section 1 | | | |
|--------------------------------|-----------------------|---------------------|--|
| Cardholder Name: First | MI | Last | Suffix |
| | | | Access Number |
| Navy Federal Debit Card/CUCARD | Daytime Telephone No. | Alternate Phone No. | Date Reported to Navy Federal (MM/DD/YY) |

Section 2


I, _____, residing at _____, state to the best of my knowledge that the above-referenced Navy Federal Debit Card/CUCARD was **(please mark only one appropriate selection)**:

- Lost: Date Card Lost** _____. I have not used the Navy Federal Debit Card/CUCARD identified above for the purchase of merchandise or services, to withdraw cash, or for any other purpose since the above date.
- Stolen: Date Card Stolen** _____. I have not used the Navy Federal Debit Card/CUCARD identified above for the purchase of merchandise or services, to withdraw cash, or for any other purpose since the above date.
- Never Received in the Mail:** I requested a Navy Federal Debit Card/CUCARD from Navy Federal Credit Union, but never received the card in the mail.
- Used Unauthorized:** I had my Navy Federal Debit Card/CUCARD in my possession when my account number was fraudulently used.
- Never Requested:** I never requested a Navy Federal Debit Card/CUCARD from Navy Federal Credit Union.

The transactions identified above were not authorized or signed by me or by anyone acting upon my authority or with my consent or knowledge. I have not authorized anyone else, orally or in writing, nor have I given consent, nor do I have knowledge of implied consent, to use or have possession of this Navy Federal Debit Card/CUCARD. Neither I, nor any person(s) authorized to use my Navy Federal Debit Card/CUCARD, have received or will receive goods or services, or will otherwise benefit, directly or indirectly, from the transactions identified above.

I believe that sales drafts, ATM transactions, telephone/mail orders, or applications bearing my purported signature, or the purported signature of person(s) authorized to use my Navy Federal Debit Card/CUCARD following the date reported above, are and will be forgeries.

I certify to the best of my knowledge and belief that all the information on this form is true, correct, complete, and made in good faith. I also understand that this information 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 statement or representation may constitute a violation of 18 U.S.C. or other federal, state, or local criminal statutes and may result in imposition of a fine, imprisonment, or both.

Cardholder Signature


Section 3

| | | | |
|--|--|------------------------|--|
| The transaction(s) identified were not made by me nor by anyone acting upon my authority or with my consent or knowledge. | <input type="checkbox"/> I have no knowledge of the identity or whereabouts of the person(s) using the Navy Federal Debit Card/CUCARD. | | |
| | <input type="checkbox"/> I can identify the suspect as: | | |
| | Name | | |
| | Address | | |
| | Phone No. | Social Security Number | |

List of Fraudulent Transactions (Required)

Please list all fraudulent charges in the space below to ensure that they are included with your fraud case. Include the merchant name, dollar amount, and transaction date for each charge. If there are a large number of charges, you may attach a copy of your billing statement(s) with the fraudulent charges marked in ink (please do not highlight charges if you are faxing). You may also list any additional charges on the back of this form.

| Transaction Date (MM/DD/YY) | Merchant Name | Dollar Amount |
|-----------------------------|---------------|---------------|
| | | \$ |
| | | \$ |
| | | \$ |
| | | \$ |

List Continues on Back



