

Issuer:	America's Christian Credit Union	Date:		Debit Card Number Ending in:	
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I/We, _____ residing at _____
in the county of _____, state of _____, herein declare that my/our card(s), described above, was:
(Please check one box below)

☐ Lost or stolen ☐ Account number used – debit card(s) still in possession
on _____, and this was reported to the credit union on _____.

A police report:

☐ **was** filed Report #: _____ Police Agency: _____
☐ **was not** filed

I/We have not used this card ending in _____ for the purchase of merchandise, services, or cash advances, on the sales listed below. I/We have not authorized anyone else, orally or in writing, nor have I/we given consent nor do I/we have knowledge of implied consent, to use or have possession of said card ending in _____. I/We have not, and will not, receive goods, services, or otherwise benefit, directly or indirectly, from the fraudulent transactions listed below.

I/We further agree that any information relating to the unauthorized use of this account may be provided to any investigative or prosecutorial agency. I/We have examined the following list of transactions: Merchant Sale(s), Cash Advance(s), Cash Machine Advance(s), Statement Charges. **(If there are additional fraudulent transactions which have not been identified below, please attach copies of statements identifying such transactions.)**

IMPORTANT NOTICE: This form is intended to assist America's Christian Credit Union with the investigation of fraud which you have identified on your account. If you believe that you are due a credit for a transaction(s) processed on your account, or if you require assistance with resolving a dispute with a merchant, you may have other recourse to dispute your transaction(s). Please call us for more information.

The following transaction issues do not qualify as "fraud" on your account:

- | | |
|--|--|
| <ul style="list-style-type: none"> ▪ Incorrect Transaction Amount ▪ Duplicate Transaction ▪ Paid by Other Means ▪ Merchandise/Services Not Received ▪ Cancelled Recurring Transaction ▪ Defective Merchandise/Services | <ul style="list-style-type: none"> ▪ Merchandise or Services not as Described ▪ Counterfeit Merchandise ▪ Misrepresentation ▪ Credit Not Received ▪ Non-Receipt of Cash ▪ Cancelled Merchandise/Services |
|--|--|

By completing this form, you are certifying that you did not participate in or benefit from any of the transactions listed below in any manner.

Transactions

Date	Amount	Merchant Information

The above identified transaction(s) was/were not made by me/us or by anyone acting upon my/our authority or with my/our consent or knowledge. I/We have no knowledge of the identity or whereabouts of the person(s) using the debit card.

Primary Member's Signature: _____

Secondary Member's Signature: _____