



UNIVERSITY OF PENNSYLVANIA
STUDENTS FEDERAL CREDIT UNION

3401 Walnut Street, Suite 431A • Philadelphia, PA 19104 • (Phone) 215-222-2604 • http://www.upennsfcu.org

AFFIDAVIT OF FORGERY

Please sign this Affidavit only if you are reporting unauthorized activity on your account

I, (YOUR NAME HERE) the undersigned, being duly sworn under oath, do hereby state and declare as follow:

- 1. This affidavit of forgery concerns University of Pennsylvania Students Federal Credit Union (Savings/Checking) account number and VISA Check Card #.
2. I reside at, in the City of, the State of, Zip Code, Social Security Number, Home Phone #, Permanent Phone #, Driver's License Number, State.
3. I state that the VISA Check Card transaction drawn on the University of Pennsylvania Students Federal Credit Union dated, in the amount of \$ to the following merchant was not authorized.
4. Neither I, nor anyone authorized by me, nor anyone with my knowledge or consent received or expected to receive any benefit or value as a result of this transaction.
5. I understand that I forfeit any charge back rights if I close my account with University of Pennsylvania Students Federal Credit Union before the issue has been resolved.
6. I understand that the Student Federal Credit Union at the University of Pennsylvania investigates all fraudulent and unauthorized transactions.
7. If I was issued temporary credit, then I understand that I may be responsible for such monies depending on the University of Pennsylvania Students Federal Credit Union's findings from its investigation.

SIGNATURE OF ACCOUNT HOLDER SUPERVISORY CHAIR

Scribed and sworn before me this day of MONTH YEAR (Stamp or Seal) *

My Commission Expires: NOTARY PUBLIC

*Notary not needed if signed in the presence of the Supervisory Chair