
Affidavit of Claimant- Instructions

Please note – a separate Affidavit and Letter of Circumstance must be completed for each type of Fraud and/or Financial Institution

When to complete the Affidavit:

- Bill Pay Fraud
- Wire Fraud
- Share Branch Fraud
- Loan Fraud
- Online Fraud

How to complete the Affidavit:

- Claimant's Name:** Enter your name. Any transactions processed under a joint owner's name, will require a new Affidavit.
- Account Number:** Enter your full account number(s), on which the misuse occurred.
- Amount:** Enter the separate amount(s) of the claim.
- Date:** Enter date (s) Fraud occurred.
- Type of Fraud:** Check the box that applies to the item(s) listed on the form. *A separate Affidavit and Letter of Circumstance must be completed for each type of Fraud.*
- Declarations:** Read the declarations listed. *The Affidavit of Claimant is a legal document. The completed form can be used in court as evidence. You may be required to testify or certify in court to the truth of all statements contained in the Affidavit of Claimant. As such, if applicable, a separate Affidavit and Letter of Circumstance must be completed for each Financial Institution involved.*
- Sign Form:** Sign your name in the space provided, indicating your phone number, and the date.

How to complete the Letter of Circumstance:

- Circumstances:** Describe any circumstances that may have contributed to the misuse of the account or item described on the form and how you became aware that fraud had occurred. For example, your checks or identification may have been lost or stolen. *This portion must be completed in all situations.*
- Suspect Information:** If you suspect someone of negotiating the instrument(s), you must write his or her name and address in the space provided, if known.
- Police Report:** Indicate whether a police report was filed. If so, write the name of the agency, the detective's name, and phone number, including the area code, in the space provided, and attach a copy of the police report to the *Affidavit of Claimant*.
- Account Closure:** Indicate whether the affected account was closed



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Affidavit of Claimant

| CLAIMAINT'S NAME | ACCOUNT NUMBER(S) | AMOUNT(S) | DATE(S) |
|------------------|-------------------|-----------|---------|
| _____ | _____ | _____ | _____ |
| _____ | _____ | _____ | _____ |
| _____ | _____ | _____ | _____ |

Unauthorized Account Access, Transfers, or Withdrawals- I did not authorize a third party to access my account(s) via online banking, or perform the above referenced transfer(s), or withdrawal(s). I did not share or give my Online Banking or Voice Response Unit (VRU) user ID or password to anyone.

Signature Forged- The signature on the face of the item(s) described below is a forgery. I did not sign the item(s) and I did not authorize the signature.

Endorsement Forged- The endorsement on the reverse of the item(s) described below is a forgery, missing, or not as drawn. I did not endorse the item(s) and I did not authorize the endorsement.

Counterfeit Item(s) - The item(s) are an imitation of one drawn on my account. I did not create, authorize the creation, or sign the item(s).

Fraudulent Account(s) or Loan(s) - I did not authorize, submit, or request for any type of Bethpage deposit account(s) to be opened, or apply as a borrower or co-borrower for any type of loan(s).

Fraudulent Account(s) or Loan Activity(s) - I did not authorize, submit, request for _____ to debit my deposit or loan account.

I declare the following:

- I did not receive any benefit or value from the proceeds of the item(s) listed on this Affidavit, and no proceeds were applied to any use or purpose on my behalf.
- I have no knowledge whatsoever of the status or disposition of the proceeds in question.
- I have not arranged with the person(s) who misused the fraudulent item(s) to be reimbursed from any of the proceeds of the fraudulent item(s).
- I promise to testify or certify to the truth of all applicable statements in this Affidavit before any judge, officer of a court, or other person, in any case now pending or which may occur regarding this Affidavit.

I declare under penalty of perjury that the foregoing is correct.

| | | |
|---------------------------------------|---------------------|-------------|
| CLAIMANT'S SIGNATURE: _____ | PHONE NUMBER: _____ | DATE: _____ |
| PRINT CLAIMANT'S NAME: _____ | | |
| CLAIMANT'S ADDRESS _____ | | |
| CLAIMANT SECONDARY PHONE NUMBER _____ | | |

To be completed by a Notary Public for Claimant:

State of _____ County of _____

Subscribed and sworn before me this _____ day of _____, (year) _____ By

SIGNATURE OF CLAIMANT

PRINT CLAIMANT NAME

Personally known _____ OR Produced _____ as identification

My commission expires _____
(SEAL, IF ANY)

NOTARY PUBLIC SIGNATURE

Claimant Name: _____

Account Number: _____

Letter of Circumstance

Describe in detail the circumstance of the fraudulent activity and how you became aware of it. For example, consider how someone could have obtained your information and/or your identification. Was your home or office burglarized? If more space is needed, feel free to attach additional sheets of paper.

I suspect the following person of having misused the fraudulent items/transactions described on the attached Affidavit:

Name: _____ Address: _____

City _____ State: _____ Zip: _____

Are you willing to prosecute? Yes No

Did you file a police report? Yes (Please include a copy) No (we may ask you to file one)

Name of law enforcement agency: _____ Case Number: _____

Detective's name: _____ Phone Number: _____

Did you close the affected account? Yes No

Since it is possible your account information may have been compromised, or other fraudulent items bearing your account name and number may appear in the future, we strongly recommend you close the affected account if you have not already done so. If you choose not to close your account, you may suffer subsequent losses on the account due to forgery or other fraud. You hereby agree to release Bethpage Federal Credit Union of any liability for any losses sustained as a result of your failure to close your account. You hereby waive any claims that you or your representatives may have against Bethpage Federal Credit Union. Your signature below signifies your agreement of this release.

I declare under penalty of perjury that the foregoing is correct. Sign and date this letter and mail it with the *Affidavit of Claimant*.

SIGNATURE **DATE**

To be completed by a Notary Public for Claimant:

State of _____ County of _____

Subscribed and sworn before me this _____ day of _____, (year) _____ By

SIGNATURE OF CLAIMANT PRINT CLAIMANT NAME

Personally known _____ OR Produced _____ as identification

My commission expires _____
(SEAL, IF ANY) NOTARY PUBLIC SIGNATURE