

Appendix C- Consumer Affidavit of Fraud/Forgery - Share drafts/Pre-authorized drafts

The Consumer submitting this Affidavit should select the appropriate box below and fill in any additional information as required. **This Affidavit must be SIGNED and NOTARIZED and presented as an ORIGINAL Document. (No photocopies can be accepted).**

STATE OF _____)

COUNTY OF _____)

<p>CONSUMER AFFIDAVIT OF:</p> <p><input type="checkbox"/> Forged Endorsement (Completed by Payee)</p> <p><input type="checkbox"/> Forged Drawer</p> <p><input type="checkbox"/> Altered Amount</p> <p><input type="checkbox"/> Altered Payee</p> <p><input type="checkbox"/> Lack of Endorsement/Not Endorsed as Drawn</p> <p><input type="checkbox"/> Counterfeit Item</p> <p><input type="checkbox"/> Unauthorized Withdrawal</p>
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I, _____, being duly sworn, depose and state the following:
(Name of Consumer)

1. That I have examined the attached draft/check, drawn on Account _____, and dated as of _____, with the draft/check number of _____; payable through _____; drawn by _____, in the sum of _____ Dollars (\$ _____); and payable to the following _____.

2. I further state that the following has been discovered on the check/draft:

- Forged Endorsement: That the signature as endorser on the above noted draft/check was not made by me nor was it placed upon said draft/check with my knowledge or consent and I have not benefited in any way from the issuance or negotiation of the above draft/check.
- Forged Drawer: That the signature appearing as drawer on the above noted draft/check was not made by me nor was it placed upon said draft/check with my knowledge or consent and that I have not benefited in any way from its issuance or negotiation.
- Altered Amount: That an alteration in the draft/check noted above was made, thereby changing the amount from \$ _____ to a new and unauthorized amount of \$ _____.
- Altered Payee: That the draft/check noted above was altered in that the original Payee of _____ was changed to _____.
- Lack of Endorsement/Not Endorsed as Drawn: That the above noted draft/check lacks the proper Endorsement as required or that the above noted draft/check was not endorsed as Drawn.
- The item described above is counterfeit.
- The item described above is/was not authorized by the maker.

1. I again further state that I received no benefits, proceeds or consideration from the above draft/check and that any and all alterations, forgeries or counterfeiting as noted above in the attached draft/check occurred without my knowledge or consent.
2. That I understand that this forgery, alteration or counterfeit may be subject to an investigation by my financial institution or its assigns as well as local, state and/or federal law enforcement agencies and that I may be asked to comply with court orders or subpoenas to give testimony as to the facts and statements contained on this affidavit.
3. That I understand that making a false and/or misleading statement as sworn in this affidavit may subject me to various local, state or federal statues and may be punishable by fines and/or imprisonment.
4. That I currently reside at:

Mailing Street: _____

City: _____ State: _____ Zip: _____

As signed by me on this date: _____ Date: _____
(Signature of Consumer)

<p>Sworn before me this _____ Day of _____, _____</p> <p>Signature _____</p> <p>Notary Public _____</p> <p>State of _____</p> <p>County of _____</p> <p>My Commission Expires: _____</p>

Note: Individual affidavits must be completed for each item submitted