



CHECK FORGERY FRAUD CLAIM PACKET

Dear Member,

Fraud is an unfortunate event to which we are all susceptible. United Community Credit Union is here to assist you in the process of recovering your funds. In order to do so we ask for your full cooperation throughout the recovery process.

Our promise is that each instance of fraud will be individually researched and investigated by our internal Fraud Department. We rely on local law enforcement to assist in our investigations as needed. Our goal is to recover your funds and, whenever possible, prosecute the wrongdoer(s) to the full extent of the law. If we are unable to reimburse you for any reason you will be duly notified once that determination has been made.

Once we have received your completed Fraud Claim Packet you will be contacted by our Fraud Officer within three business days. A Police Report must be filed and a case number must be attached to the Fraud Packet.

Please be sure to complete the following so that we may promptly begin our investigation:

- Statement of Fact
- Fraud Transaction List
- Fraud Questionnaire
- Fraudulent Account Activity – Affidavit
- Police Report

Thank you,

Tricia Ramos
Fraud Analyst
832-615-4023 | cardservices@unitedccu.com
13700 E Sam Houston Pkwy N. Houston, TX 77044

Normandy
771 Normandy St
Houston, TX 77015

Galena Park
1700 16th Street
Galena Park, TX 77547

Summerwood
13700 E Sam Houston Pkwy N.
Houston, TX 77044

Crosby
14028 FM 2100
Crosby, TX 77532



STATEMENT OF FACT

Please state the details occurring around the fraud that has taken place on your account. It is important to document everything you know regarding the fraudulent activity.

(_____)_____ - _____
Member Phone Number

Email Address

Signature of Member

Date



FRAUD TRANSACTION LIST

List all transactions on your account that are fraudulent.

Date of Transaction	Amount of Transaction	Check Number	Made payable to

Signature of Member

Date



FRAUD QUESTIONNAIRE

FIID: 001757

Member Name: _____

Account Number: _____

Please answer all of the following questions to the best of your ability.

CHECK FORGERY:

- 1) Have you written checks to this individual/business before?
a. If so, when and for what purpose?
2) Who is authorized to use your account?
3) Who have you authorized to sign checks on your account?
4) Where do you store your checks?
5) Who has access to your checks?
6) Who has access to your account information?
7) Who has committed fraud against your account?
8) Have you had previous encounters with the person committing fraud against your account?
9) Do you know the person that has committed fraud against your account?
10) What is the number of the last check you wrote?
a. What was the amount?
b. Who was the check made payable to?
11) What other items might be missing?
12) Please provide your Police Report number:
13) Are you willing to prosecute if photos are available? Yes No
14) Would you be willing to file charges and testify in court even if you know the individual(s) responsible? Yes No

By signing you acknowledge that you are aware that United Community Credit Union will prosecute the wrongdoer(s) and that your assistance may be required.

Signature of Member

Date



FRAUDULENT ACCOUNT ACTIVITY - AFFIDAVIT

Before me, the undersigned authority, personally appeared _____ [member],
who, being by me duly sworn, deposes and claims the facts herein stated are true and correct.

Account on which said transactions occurred: _____

_____ Signature of Affiant

_____ Printed Name of Affiant

_____ Address of Affiant

_____ City, State Zip Code

Sworn to and subscribed before me on this _____ day of _____ 20____.

_____ Signature of Notary

_____ Printed Name of Notary

State of _____

County of _____

_____ Notary Seal

NOTARY PUBLIC

My commission expires: _____, 20____.



INTERNAL USE ONLY

Claim taken by: _____

Teller Number: _____

Date: _____

1. ___ Verify that the entire Check Forgery Fraud Claim Packet has been completed.
 - a. ___ Statement of Fact
 - b. ___ Fraud Transaction List
 - c. ___ Fraud Questionnaire (must include Police Report info)
 - d. ___ Fraudulent Account Activity - Affidavit
2. ___ Verify that the Affidavit has been notarized.
3. ___ Verify that every page has been signed by the member.
4. ___ Print account Transaction History showing all fraudulent activity.
5. ___ Give Cover of Check Forgery Fraud Claim Packet to member.
6. ___ Send the remaining Check Forgery Fraud Claim Packet to the Accounting Department.
7. ___ Take any other necessary action to avoid additional losses.
 - a. Add any additional comments below:
