



# affadavit of forgery member information

Important: the person alleging forgery MUST complete this form in longhand

I am first duly sworn and state I am:

1. Member Name \_\_\_\_\_

Account Number \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Phone # (work) \_\_\_\_\_ Phone (home) \_\_\_\_\_

2. The instrument(s) forged is(are) a:

Check

Cash Withdrawal Voucher

Share Check

Loan Application / Document (including co-maker forgery)

Other \_\_\_\_\_

3. The instrument(s) is(are) drawn on : \_\_\_\_\_

4. On the instrument(s) I am named as the:

Payee / Endorser (on the back of the check / share check, or bottom of withdrawal voucher)

Maker (on the note or face of check / share check)

Co-maker (on a loan)

Other \_\_\_\_\_

5. The signature for each instrument(s) listed below and attached to this affidavit is not written nor authorized by me and is a forgery:

	Date	Instrument Number	Dollar Amount
1.	_____	_____	_____
2.	_____	_____	_____
3.	_____	_____	_____

6. I did not receive any part of the proceeds of the instrument(s) listed above. This affidavit is made voluntarily for the purpose of establishing the fact that my signature is a forgery.

7. Do you know who forged your signature?  Yes  No If yes, then provide details on the back of this form or on a separate page.

8. I understand this forgery is subject to investigation by local, state, and / or federal law enforcement agencies. I may be required to comply with a court order or a subpoena to give testimony.

9. I understand making a false sworn statement is subject to federal and / or state statutes and may be punishable by fines and / or by imprisonment.

10. I understand and agree that Wilkes Barre City Federal Credit Union has no obligation to reimburse for any losses resulting from this alleged forgery unless I cooperate fully in any investigation and / or prosecution of this alleged forgery, including but not limited to filing a complete report with the appropriate law enforcement officials, participating in any investigation by law enforcement, and attending and participating as a witness in any legal proceeding.

Sign your name five times: \_\_\_\_\_

\_\_\_\_\_

State of \_\_\_\_\_, County of \_\_\_\_\_

Subscribed and sworn to before me this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_\_

\_\_\_\_\_ Notary