

## 411 Theodore Fremd Ave. • Rye, NY 10580 - 1426 • 800.431.2754 • USALLIANCE.ORG

## **ATM Dispute/Fraud Form**

Please return this form to USALLIANCE within seven days to the address above or dispute rights may be forfeited. You may also fax this form to 914.462.3530, Attention: EFT Department

Please Clear	ly Print All Infor	mation		
Cardholder Name			Cardholder Phone Number	
Card Number (16-digit Card Number or Account Number)			Cardholder Email Address	
☐ My card has b	een: 🗆 lost 🗀 stole	n. I first learned that	my card was missing on	
☐ The loss/theft	was first reported on		at	branch.
☐ I certify that th	e above card was in r	ny possession at the	time of the below transactions.	
<ul><li>Was the PIN</li><li>Was the PIN</li></ul>	Naccessible to an una Naccessible to an una	authorized user? 🔲	∕es □ No	nsaction(s) took place.
☐ I certify that I g	gave the card indicate	d above to:		
		on	whose address is:	
"lost/stolen" to	prevent additional ur		rrounding the transaction(s) below. Your card	l's status will be deemed
Transaction Date	Amount Requested	Amount Dispersed	Bank/Credit Union/Store Name and A	ddress
Date	Hequested	Bioperaca		
□ Descriptio	n (required) — Pl	ease describe what h	appened.	
Disclosure A	greement and A	Authorization		
I make this affidate above described transaction(s). I strong OVER TO THE Potent and conviction for	vit voluntarily. I state the ATM transaction(s) wo wear this affidavit is trouice, AND willful vice of EF and under the of the order of the ord	nat I have carefully exe ere not processed as ue and understand th plations of the Federal T services carries a \$	with this form for fraudulent transactions amined my checking and/or savings stateme requested by me nor did I receive benefit or at, ALL VIDEO TAPES OF THE TRANSACTIC Electronic Funds Transfer Act Regulation E of 10,000.00 fine and a 10-year jail term. I furth f perjury that the forgoing is true and correct	ent(s) and find that the proceeds from the DN WILL BE TURNED carry criminal penalties, her state that the signature
Cardholder Signa	ature		Date	