



Affidavit of Forgery Checklist

Please use the Affidavit of Forgery to report checks which have been fraudulently cashed on or against your account.

To speed processing of your request, please follow these steps...

1. Fill out the Affidavit of Forgery completely and sign it in the presence of a Notary Public for the state you are physically in at the time of signing.
2. Complete the Fraud/Forgery Investigation Form
3. Send your form to DCU for processing by doing both of the following:
 - Fax your form to the Electronic Services Fax Line: 508.804.3630

AND

- Mail your completed form to:
Digital Federal Credit Union
Attn: Loss Prevention
220 Donald Lynch Boulevard PO Box 9130
Marlborough, MA 01752

What you can expect

If you fax your completed form to us or bring the completed form to a DCU branch office, we'll process your request within 48 hours of receipt unless further investigation is required.

If you mail your completed form to us without faxing it first, you **MUST** allow 2 weeks for postal delivery and DCU processing.



220 DONALD LYNCH BOULEVARD • PO BOX 9130 • MARLBOROUGH, MA 01752-9130
508.263.6700 • 800.328.8797 • dcu.org • dcu@dcu.org

FRAUD/FORGERY INVESTIGATION FORM
(To Be Completed By Member/Claimant)
Please Print

Please explain ¹⁾ how you think this fraud/forgery occurred; ²⁾ who you think committed or may have been involved in this crime; and ³⁾ how they obtained the check(s) and/or information to accomplish the fraud/forgery.

Please answer the following questions completely. **DO NOT** leave any questions blank. Enter N/A in any blank where the question does not apply to your particular situation.

1. Was/were the check(s) ever in your possession prior to the fraud/forgery? Yes No

If Yes, where did you keep/store the check(s)?

2. Do you believe the check(s) was/were: Lost Stolen

When? _____

Where? _____

How? _____

3. Who else had access to the check(s) besides you?

Name: _____

Address: _____

Phone Number(s): _____

4. Did you report the theft or loss to the Police? Yes No

Police Report No.: _____ Police Dept: _____

5. Regardless of whether the check(s) was/were ever in your possession prior to the fraud/forgery, how do you think it/they fell into the hands of the person(s) who committed this offense?

6. Who do you think took the check(s)?

Name: _____

Address: _____

Phone: _____

7. Do you know the payee or endorser of the check(s)? Yes No
Name: _____
Address: _____
Phone: _____
How do you know this person? _____

8. Do you recognize any handwriting, identification, description or any other entry that appears on the check(s)? Yes No
If Yes, who do you identify as the author, or may be involved?
Name: _____
Address: _____
Phone: _____

9. Is there anyone you have not mentioned that you suspect of possible involvement for any reason? Yes No
Name: _____
Address: _____
Phone: _____
Why do you suspect this person?

10. Were any other check(s)/deposit slips, savings deposit/withdrawal slips, ATM cards, PIN numbers, credit cards, safe deposit box keys, certificate of deposits, or other financial items/instruments or personal identification lost or stolen at the same place or time? Yes No
If Yes, please identify the items: _____

11. Do you have any other accounts with this or any other institution that you feel may have been compromised as a result of this incident? Yes No
If Yes, please identify those accounts: _____

12. Has anyone been in your home or business where they would have had access to your checks or account information? Yes No
If Yes, describe the person(s) and explain the circumstances: _____

13. Have you ever been a victim of this or similar type of crime before? Yes No
If Yes, please describe the circumstances of that incident and when it occurred:

The information contained in this Fraud/Forgery Investigation Form is true, accurate and complete to the best of my knowledge and belief.

Signature: _____ Date: _____

