

CUMIS Insurance Society, Inc. CUMIS Specialty Insurance Company, Inc.

P.O. Box 1221 Madison, WI 53701-1221 Phone: 800.637.2676 • Fax: 608.231.7900 http://www.cunamutual.com

CLAIM NO.	
STATE AND CONTRACT NO.	

Important: The person alleging forgery must complete this form in longhand.

AFFIDAVIT OF FORGERY

		• •• • • • • •	II OF FURGER				
1.	I am first duly sworn and sta						
	Name						
	City, State, Zip						
				· \			
2.		per Home () Work () ent(s) forged is/are a: (Check the appropriate box)					
۷.	Check	are a. (Oneck the appro	<i>□</i> Cash Withdrawal Vouc	hor			
	☐ Share Draft		Loan Note (including Co-maker forgery)				
		_ , - , - , - , - , - , - , - , - , - ,					
	Other (specify) Name of Credit Union or Bank						
3.	The instrument(s) is/are dra-	wn on					
4. On the instrument(s) I am named as the: (Check the appropriate box)							
			or bottom of withdrawal vouc	her)			
	Maker (on note or face of	of share draft/check)					
	Co-maker (on a loan)						
	Other (specify)						
5.	This signature for each instr is a forgery:	ument(s) listed below a	ınd attached to this affidavit i	s not written nor authorized by me and			
	Date		Instrument Number	Dollar Amount			
	a)						
	c)		·	- f 41			
_	1 -15-1		is required, use a separate s	•			
	purpose of establishing the	eceive any part of the proceeds of the instrument(s) listed above. This affidavit is made voluntarily for the festablishing the fact that my signature is a forgery.					
7.	Do you know who forged yo this page.	o you know who forged your signatures? \square Yes \square No If yes, provide details on a separate page or the back of his 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 subpoena to give testimony.						
9.	I understand making a false fines and/or by imprisonmen		ubject to federal and/or stat	e statutes and may be punishable by			
	Sign your name five times:						
		-	 				
							
							
Sta	ate of	County	of				
Su	ubscribed and sworn to before	me this day	of	·			
		Nota	ry				
-			<i>y</i>				



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

Please explain ¹⁾ how you think this fraud/forgery occurred; ²⁾ wh involved in this crime; and ³⁾ how they obtained the check(s) and	no you think co d/or informatior	mmitted or may have been to accomplish the fraud/forgery.
Please answer the following questions completely. DO NOT lea Enter N/A in any blank where the question does not apply to you		
1. Was/were the check(s) ever in your possession prior to the fr		
If Yes, where did you keep/store the check(s)?	∐ Yes	□ No
2. Do you believe the check(s) was/were: When?	☐ Lost	Stolen
Where?		
How?		
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? Police Report No.: Police Dept:	Yes	□ No
5. Regardless of whether the check(s) was/were ever in your po	ssession prior	to the fraud/forgery, how do you
think it/they fell into the hands of the person(s) who committed the	his 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)? Name:	☐ Yes	□ No	
Address:			
Phone:			
How do you know this person?			
8. Do you recognize any handwriting, identification, descript	ion or any other e ☐ Yes	ntry that appear ☐ No	s on the check(s)?
If Yes, who do you identify as the author, or may be involved Name:	d?		
Address:			
Phone:			
9. Is there anyone you have not mentioned that you suspec	☐ Yes	☐ No	reason?
Name:			
Address:			
Phone:			
Why do you suspect this person?			
10. Were any other check(s)/deposit slips, savings deposit/s cards, safe deposit box keys, certificate of deposits, or other lost or stolen at the same place or time?	r financial items/in ☐ Yes	struments or pe	numbers, credit rsonal identification
If Yes, please identify the items:		<u> </u>	
11. Do you have any other accounts with this or any other in as a result of this incident? If Yes, please identify those accounts:	☐ Yes	☐ No	
12. Has anyone been in your home or business where they information? If Yes, describe the person(s) and explain the circumstance	☐ Yes	access to your o	
13. Have you ever been a victim of this or similar type of cri	☐ Yes	☐ No d:	
			
The information contained in this Fraud/Forgery Investigatio my knowledge and belief.	n Form is true, ac	curate and com	plete to the best of
Signature:	Date:		