



DECLARATION OF UNAUTHORIZED USE

Please return this declaration ONLY if you are reporting unauthorized charges.

State of _____ County of _____

I, _____ the undersigned, being duly sworn and under oath, do hereby state and declare as follows:
(please print)

1. This declaration concerns Citibank MasterCard/Visa Account Number _____

2. My business address is _____, in the City of _____
and the State of _____, Zip Code _____. Business Phone # (_____) _____

3. **I HAVE INDICATED ON MY BILLING STATEMENT(S) THOSE TRANSACTIONS THAT ARE FRAUDULENT AND INCLUDED IT WITH THIS DECLARATION.**

4. Neither I, nor anyone authorized by me, nor anyone with my knowledge or consent received or expect to receive any benefit or value as a result of this transaction(s).

5. My account number was used in an unauthorized fashion. (Please describe.) _____

a. Lost/Stolen. Date: _____ Location: _____ If Stolen, Police Report Filed? Yes No

If Yes: City _____ Precinct _____ Case # _____

b. Never received.

c. All card(s) were in my possession at the time of fraudulent use.

Other Circumstances: _____

6. I have reason to believe the following individual(s) utilized or had access to my account number without my authorization:

Name(s) _____

Address(es) Street _____ Phone # (_____) _____

City _____ State _____ Zip Code _____

Reason: _____

7. The signatures set forth below are the signatures of **ALL AUTHORIZED USERS** on this account (continue additional authorized user signatures on the back):

PRINT NAME

SIGNATURE

8. I understand that Bankcard Security investigates alleged fraudulent or unauthorized credit card usage and may refer the same to the appropriate law enforcement agency. I agree to cooperate in the prosecution of individuals charged with fraudulent or unauthorized credit card usage.

Cardholder Signature

A FALSE DECLARATION TO A FEDERALLY INSURED FINANCIAL INSTITUTION MAY BE A VIOLATION OF FEDERAL AND/OR STATE LAW.

Fax or mail this document and the billing statement(s), which clearly indicate disputed transactions to Citibank:

Fax: 605-330-6801

**Mail: Citibank (South Dakota), N.A.
Security Services
P.O. Box 6125
Sioux Falls, SD 57117**