

Affidavit by Cardholder: Irregular use of card

Debit Card Fraud Department (Fax Number: 011 371-4320) Debit&Cheqcrdfd@fnb.co.za

I, the undersigned (Full Name) _____

hereby declare the following under oath and in English:

I am an adult *(male/female) with Identity number _____ age _____

Resident at _____

and employed at _____

Telephone (H) _____ (W) _____

Email _____ (Cell) _____

I am the lawful holder of a First National Bank *(Visa/MasterCard) card number:

On _____ (date) I became aware that unlawful transaction/s had been processed against my account, and I reported the fact to:

_____ on _____
(Name of Employee and Branch) (Date)

At the time of the processing of the transaction/s the above mentioned signed card was in my possession: YES or NO. At no stage did I authorize or approve any of the unlawful transaction/s.

Please attach a clear copy of the back of the card where the card number is visible, to the affidavit.

Copy of card received: Y: N: (if not, please supply a reason)

PASTE VISIBLE COPY OF THE BACK OF THE CARD HERE

Circumstances

1. How did you become aware?

2. What happened e.g. Were you ever assisted / interrupted when using your card before the recorded transactions?

3. Where did the incident occur (date, time, and location)?

All of the unauthorized transaction/s are listed below or highlighted on the attached statement with specified transactions:

	DATE :	TRANSACTION NAME:	AMOUNT :
1.			
2.			
3.			
4.			
5.			
6.			
7.			
8.			
9.			
10.			

1. I declare and confirm that the above mentioned list is the full and final list of all unauthorized transactions.
2. I further declare that the information supplied in this affidavit is true and correct and complete.
3. I fully understand that providing false information or failing to provide the information required constitutes misrepresentation.
4. I have no objection to taking the prescribed oath, which I regard as binding on my conscience.

I swear that the content of this statement is the truth, the whole truth and nothing but the truth "so help me God"

Signed at _____ on the _____ day of _____ 20_____.

Declarant's signature

Having appeared before me on _____ and having acknowledged:-

1. that the above declarant knows and understands the contents of his/her declaration; and
2. that he/she has no objection taking the prescribed oath and considers the prescribed oath/solemn affirmation to be binding on his/her conscience and added his/her signature above

I certify that the above declarant acknowledges that he/she is conversant with the contents of the declaration and understands it. The declarant's signature was affixed to it in my presence and the declaration was sworn to before me

at _____ on _____

COMMISSIONER OF OATHS(FULL NAMES) _____
DESIGNATION _____
CAPACITY _____
BUSINESS ADDRESS _____
