

Declaration of Unauthorized Use

Lthe undersigned, do hereby state and declare as follows:						
1. This declaration concerns the following account number:						
2. I HAVE INDICATED BELOW AND/OR ON THE ATTACHED THOSE TRANSACTIONS THAT ARE FRAUDULENT. I as the Customer, only need to complete and return this form if fraud charges post to my account.						
Disputed Transact	Amount	Reference Number			ant Name	
Jule Date	Amount	Ittel	ierence number		unt Hume	
3. Please check the statement that applies to your situation: My Card was:						
☐ Lost ☐ Stolen	:					
Date card was lost or stolen:						
Place:		ace:				
If stolen, was police report filed?			☐ Yes ☐ No If yes, Case#:			
City:						
Station:						
Phone Number:						
Police Officer & Badge #:						
☐ I have unauthorized transactions, but my card is in my possession.						
☐ I never received this card in the mail.						
4. Indicate the name on the card that was lost/stolen/never received:						
5. I have reason to believe the following individual(s) utilized the credit card(s) described above or had access to my account number without my authorization:						
Name	Address		Province/Po	stal Code	Reason	
6. I have confirmed that ALL AUTHORIZED USERS ON THIS ACCOUNT did not make these charges.						
7. 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).						
8. If you have additional information about the merchant(s) or misuse of the card, please provide the detail here.						
9. I understand that Security Services investigates alleged fraudulent or unauthorized credit card usage and may refer the same to the appropriate law enforcement agency. I agree to cooperate in any prosecution of individuals charged with fraudulent or unauthorized credit card usage.						
Please sign and date below:						
Date				Cardholder/APC Signature		
Please fax or mail this document with the fraud charges listed above or the charges can be circled on a billing statement(s), which clearly						

Toll Free Fax#: 866-763-7946 International Fax#: 605-338-2069

indicate disputed transactions to Citibank.

Mail: Citibank, N.A., Security Services, P.O. Box 6125 Sioux Falls, SD 57117

Citi Transaction Services transactionservices.citi.com

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