

B-111 Report of Unauthorized ATM/Debit Card Transfers (ATM & PIN-Based Purchases)

| CUSTOMER NAME: | CARD # (last 4 digits): | | | |
|---|--|--|--|--|
| ACCOUNT NUMBER (Last 4 digits) | PERSON REPORTING ALLEGED UNAUTHORIZED TRANSACTION(S) | | | |
| ACCOUNT TITLE | | | | |
| ADDRESS | (WORK) | | | |
| - | MSTANCES OF LOSS | | | |
| Check either A, B, C or D A □ My ATM/Debit Card bearing number (Is | ast 4 digits) has been ⊡lost ⊡stolen. | | | |
| , | t Card missing on(date) | | | |
| * ** | on(date) | | | |
| | your card was lost/stolen: | | | |
| | | | | |
| | | | | |
| possession, but money was withdrawr withdrawal(s) on | number (last 4 digits) It has not left my from my account without my authorization. I learned about the date). | | | |
| C. My ATM/Debit Card was never receive | d (date) that money was withdrawn from my account(s). | | | |

Form B-111 rev. 01/20 Page 1 of 2

B-111 Report of Unauthorized ATM/Debit Card Transfers (ATM & PIN-Based Purchases)

| 2. | A. I have have not allowed anyone to use my permitted access to use the card below: Name | | | y ATM/Debit Card. Please list any Relationship | | person you authorized or Purpose | | |
|-----------------------------------|---|--|--------------|---|--------|-------------------------------------|--|--|
| | B. Please sta | B. Please state how or where you keep your Personal Identification Number (PIN): | | | | | | |
| | C. Who could | d have had access | | | | | | |
| 3. | Provide list of | rovide list of unauthorized transfers: | | | | | | |
| | DATE | AMOUNT | ATM LOCATION | DATE | AMOUNT | ATM LOCATION | | |
| - | | | | | | | | |
| = | | | | | | | | |
| - | | | | | | | | |
| - | | | | | | | | |
| = | | | | | | | | |
| = | | | | | | | | |
| - | | | | | | | | |
| Total Unauthorized Withdrawals \$ | | | | | | | | |
| | POLICE REPORT (For informational purposes, not required for claim processing) | | | | | | | |
| 4. | . I □have □have not reported this incident to the police. Precinct | | | | | | | |
| Officer Name Complaint # | | | | | Da | ate | | |
| 5. | I have reported all the facts and circumstances surrounding this matter to Apple Bank for Savings fully ar accurately. If any additional information comes to my attention regarding this matter, I will advise Apple Bar for Savings as soon as possible to assist my claim. | | | | | | | |
| | | | | | | | | |
| | | For Bank Use Only | / | | | | | |
| Da | Date: | | | Cardholder Signature (optional) | | | | |
| Cr | edit: | | | | 2 | • | | |
| De | bit: | | | Date | | | | |
| αA | proved by: | | | | | | | |

Form B-111 rev. 01/20 Page 2 of 2