

CUSTOMER AFFIDAVIT OF ERRONEOUS TRANSFER

Please complete only **ONE** of the sections below. Once completed, please send the form and any supporting documentation that may help facilitate our investigation to the following:

Fax to: 415-449-3446
Email to: claims@chime.com

If you have any questions, please contact **Selina Smith** at selina.smith@chime.com or 1-844-244-6363.

Your Name: 156167041243
Your Chime Account #: _____
Amount(s): \$ 1,227
Transfer Date(s): 12/17/20

Please complete only ONE of the sections below.

SECTION 1: TRANSFER NOT AUTHORIZED

By selecting this option, I certify that the transfer(s) listed above was (were) not made by me, nor a person authorized by me.

- Has your mobile phone been stolen, lost, or misplaced? (Select one):
 NO YES (If Yes, complete the following)
Please provide additional details as to what happened: _____
- Have you given permission to anyone to use your mobile device? (Select one):
 NO YES (If Yes, complete the following)
Name: _____
Relationship: _____
- Does your mobile device require a passcode or fingerprint to unlock and use? (Select one)
 NO YES (If Yes, complete the following)
Where do you store your passcode? (list "fingerprint" if your fingerprint is used) _____
- The Chime mobile app requires a passcode to gain access to all transfer services. Have you shared this passcode with anyone? (Select one):
 NO YES (If Yes, complete the following)
Who did you share your passcode with? No
What is your relationship to this person? N/A
- Access to your online account at www.chime.com requires a password. Have you shared this password with anyone? (Select one):
 NO YES (If Yes, complete the following)
Who did you share your password with? _____
What is your relationship to this person? _____
- When was the last time you changed your password for your Chime account? Four month
- Have you filed a police report? (Select one)
 NO YES (If Yes, complete the following)
District/Officer name: _____
Report number: _____ Suspect name: _____

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SECTION 2: DUPLICATE TRANSFER

I intended to send a single transfer in the amount of \$ _____ to _____
(*recipient name or email address*), but _____ (*number of transfer[s]*) in the amount of \$ _____ was (were)
transferred instead.

1. Have you contacted the recipient directly to resolve the issue? (Select one):

NO YES (If Yes, complete the following)

What was the outcome? _____

What is your relationship to this person? _____

SECTION 3: INCORRECT TRANSFER AMOUNT

I intended to transfer the amount \$ _____ to _____ (*recipient name or email
address*), but the amount \$ _____ was transferred instead.

1. Have you contacted the recipient directly to resolve the issue? (Select one):

NO YES (If Yes, complete the following)

What was the outcome? _____

What is your relationship to this person? _____

SECTION 4: TRANSFER SENT TO INCORRECT RECIPIENT

I intended to transfer the amount \$ _____ to _____ (*intended recipient name
or email address*), but the amount \$ _____ was transferred to _____ (*actual
recipient name or email address*) instead.

1. Have you contacted the recipient directly to resolve the issue? (Select one):

NO

Do you know the individual who received the transfer? _____

YES (If Yes, complete the following)

What was the outcome? _____

What is your relationship to this person? _____

SECTION 5: TRANSFER NOT RECEIVED

I transferred the amount \$ _____ to _____ (*recipient name or email
address*), but they state that no transfer was received. I have confirmed the funds were debited from my Spending Account on
_____ (*date*).

I declare under penalty of perjury (under the laws of the United States of America) that the above information is true and correct to
the best of my understanding.

Cardholder signature: _____ Date: _____

Contact number (during the hours of 8am-5pm CST): _____