

## POSTBANK FRAUD AFFIDAVIT

**Smart Save Book/Mzansi Card/Flexi Card/Aspire Card/Term Deposit**

Please complete in print and ensure that the font is legible

I, the undersigned (*Name and Surname*).....

**STATE IN ENGLISH UNDER OATH:**

**1.**

I am an adult male/female person, with ID number ....., residing at

.....

.....and my contact number is:.....

and my email address is .....

**Select only the relevant options from the following and complete detail where applicable:**

**2.**

I have registered a case with the South African Police Service. SAPS Case Number.....

**3.**

I am a registered Postbank customer with account number .....

**4.**

The following Postbank cards/Smart Save Book/Term Deposit were issued to me:

|   | Card / Smart Save Book/TD Number | On Date | At which Post Office |
|---|----------------------------------|---------|----------------------|
| 1 |                                  |         |                      |
| 2 |                                  |         |                      |
| 3 |                                  |         |                      |

**5.**

I do not have a Postbank card/Smart Save Book/Term Deposit in my possession.

**6.**

Did you do a card/book/TD replacement within the last thirty days?

|     |    |
|-----|----|
| Yes | No |
|-----|----|

If, Yes – where ..... and when 20...../...../.....

**7.**

I am disputing the following transactions: (Please list each transaction)

|   | Date | Amount | Comments |
|---|------|--------|----------|
| 1 |      |        |          |
| 2 |      |        |          |
| 3 |      |        |          |
| 4 |      |        |          |
| 5 |      |        |          |
| 6 |      |        |          |

**8.**

I know and understand the contents of this Affidavit and have no objection of taking the prescribed OATH. I consider the OATH as binding to my conscience.

Signature of customer: .....

Thumbprint  
Of  
Illiterate  
Customer

I certify that the above statement was taken by me and that the deponent has acknowledged that he/she knows and understands the contents of this statement. This statement was sworn before me and the deponent's signature was placed thereon in my presence at the ..... Post Office on this ..... day of ..... 20..... at (time).....

SIGNATURE: .....  
 COMMISSIONER OF OATHS (RSA): Ex Officio  
 FULL NAMES AND SURNAME (PRINT) .....  
 DESIGNATION: (RANK) .....  
 BRANCH NAME: .....  
 ADDRESS: .....  
 .....  
 CONTACT NUMBER/BRANCH NUMBER: .....  
 DATE: .....

Date Stamp

 **Please email this Affidavit to [fraud@postbank.co.za](mailto:fraud@postbank.co.za)**

**Ensure that the following documents are included:**

- 1) Original certified copy of the customers ID or the front and back of the Smart ID Card,
- 2) Copy of the front and back of the Postbank card/Copies of all the pages in the Smart Save Book/Copy of the Term Deposit or a short Memo indicating the reason why the card/Smart Save book/TD is not with the customer.