MANNATECH

FRAUD STATEMENT

Unauthroized Use of a Credit Card, Debit Card, or other payment method

To be completed by the Primary Account Holder. Name and address must match the ID provided and payment method account information.

Please return the completed form within 10 business days to Customer Care by e-mail custserv@mannatech.com or by fax at 1-800-825-6584.

INFORMATION AND DETAILS

Cardholder's Name	Home Phone	Work Phone

Mailing Address Street City State Zip

Mannatech Associate Number (if applicable)	Last 4 Digits of Card or Account Number	Attach front and back copy of government issued ID ☐
Type of Card or Payment Method Debit ____ Visa ____ Master Card ____ AMEX ____ Other ____ (_____)	At the time of the Unauthorized transactions, my card was: ____ In my possession _____ Lost ____ Never received in the mail _____ Stolen I believe this to be a case of: ____ Fraudulent application _____ Counterfeit ____ Mail/Telephone order/Internet Fraud ____ Other: _____	Police Report Information: Case #: _____ Date of Report: _____ Agency: _____ Telephone: _____
Date Cardholder Discovered Loss	Date Reported Loss to Credit Card Company or Bank	Date of First Fraudulent Transaction

- I complete this Fraud Statement to certify fraudulent use of my Credit Card, Debit Card or other payment method.
- I certify that I did not give, sell or trade my account information to anyone nor did I give anyone permission to use my account information.
- I certify that no authorized users used the account for any transaction(s) on or after the date of the first fraudulent transaction indicated below.
- I certify that I did not receive any benefit from the unauthorized use of my Credit Card, Debit Card, or other payment method.
- I certify that I have examined all unauthorized transactions for my account; further, in each instance, I did not authorize the transaction(s).
- I certify that I have notified my Credit Card Company or Bank of the unauthorized use of my Credit Card, Debit Card, or other payment method.
- I have / have not (cirzcle one) disputed the unauthorized charges with my Credit Card Company or Bank.

Total amount of unauthorized transactions: $ _____

Name and Address of Unauthorized User (if known or suspected)

Please provide additional details (if necessary) on a separate sheet

SIGNATURES

I give my consent to Mannatech, Inc. to release any information regarding me and all involved accounts to any local, state, and/or federal law enforcement agency to be used in the investigation and/or prosecution of any person(s) who may be responsible for unauthorized use of my account information. I certify that the information I have provided on this Fraud Statement is true, accurate and complete, and that these statements are made in good faith. I understand that knowingly making false or misleading statements or representations may constitute a violation of the law and/or the Policies and Procedures and/or Terms and Conditions of the Mannatech Associate Agreement (if I am a Mannatech Associate). If I am a Mannatech Associate, I understand and agree that any commissions, bonuses or other compensation that I received as a result of the unauthorized use reported on this Fraud Statement will be debited from my payment in the next commission cycle. If I am a Mannatech Associate and my payment in the next commission cycle is not sufficient to cover the amount of said debit, I expressly agree to repay to Mannatech, Inc., any remaining balance within 15 days of the payment date of the next commission cycle. Any products or packs returned for refund that entitles an Associate to qualify for incentives or commissions may result, at Mannatech's discretion, in loss of incentive qualification and commissions earned.

Signature_____ Date_____

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