

Notification of Disputed Transaction

Account Information

Name:

Card Number:

Card Type:

☐ Debit ☐ Credit

Street Address:

City, State & Zip:

Daytime Phone Number:

Evening Phone Number:

Transaction Information

Transaction Date

Merchant Name

Dollar Amount

1. ____/____/____

What was purchased? ☐ Merchandise ☐ Services

Describe the Merchandise/Services Purchased:

Dispute Reason

Please select ONE item below that best describes the details of your dispute. Please note that it may not be possible to assist you with your dispute unless all relevant information or documents are submitted with this form.

☐ **MULTIPLE PROCESSING**

I have been billed multiple times (2 or more) for the same purchase. The original charge posted to my account on ____/____/____.

☐ **DIFFERENCE IN AMOUNT**

The amount on my sales slip differs from the amount billed. Enclosed is my receipt showing the correct amount.

☐ **PAID BY OTHER MEANS**

The charge(s) was paid by another method. The charge was paid by ☐ Cash ☐ Debit/Credit Card ☐ Check ☐ Other. Enclosed is a copy of the proof of payment (cancelled check, receipt or account statement).

☐ **CANCELLED TRANSACTION**

I cancelled this recurring transaction with the merchant on ____/____/____. No charges after this date are authorized from this merchant. I was advised of the cancellation policy ☐ Yes ☐ No.

☐ **CREDIT NOT RECEIVED**

I was given a credit slip or refund acknowledgement by the merchant on ____/____/____, but the credit has not yet posted to my account. Attached is a copy of the credit slip/refund acknowledgement. *If no credit slip/refund acknowledgment given, please provide merchant's response in Attempt To Resolve/Additional Details section.

☐ **CANCELLED RESERVATION**

I cancelled this reservation with the hotel/lodging merchant on ____/____/____. The cancellation number provided to me is: _____. *If no cancellation number given, were you advised of the cancellation policy ☐ Yes ☐ No. Please provide additional information or merchant's response in Attempt To Resolve/Additional Details section.

☐ **ATM DISCREPANCY**

The incorrect amount was dispensed from an ATM. ☐ No funds received ☐ Portion of funds received - Total received: _____

☐ **MERCHANDISE/SERVICES NOT RECEIVED**

I have not received the merchandise/services which were expected on ____/____/____. I have contacted the merchant on ____/____/____ but a credit has yet to post to my account. Was the merchant unwilling or unable to provide the merchandise/services ☐ Yes ☐ No. *Please provide additional information or merchant's response in Attempt To Resolve/Additional Details section.

Cardholder Signature: _____ Date: _____

CU Contact: _____
Total Disputed Items: _____
Page _____ of _____
Additional Comments:

ACTION REQUESTED (Check One):

- ☐ Cardholder Dispute – Process chargebacks as allowed under Network Rules
☐ Credit Union Dispute – Process chargebacks as allowed under Network Rules
☐ Request Sales Draft Only
☐ Rebuttal Documentation

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☐ **MERCHANDISE RETURNED**

I have returned the merchandise on ____/____/____ and requested a refund from the merchant. My Return Authorization Number (RAN) or cancellation number is: _____. The merchandise was returned via ☐USPS ☐FedEx ☐UPS ☐Other. My tracking# _____. *Please provide additional information or merchant's response in Attempt To Resolve/Additional Details section.

☐ **NOT AS DESCRIBED**

The merchandise/services are different from what was ordered or described. I have detailed what was expected, what was received, and indicated my attempt to return below. *Please provide additional information or merchant's response in Attempt To Resolve/Additional Details section.

☐ **DEFECTIVE MERCHANDISE**

The merchandise ordered and received was damaged or defective. I have contacted the merchant and still did not receive resolution. A detailed explanation including my attempt to return is detailed below. *Please provide additional information or merchant's response in Attempt To Resolve/Additional Details section.

Attempt To Resolve/Additional Details

Did you attempt to resolve with the merchant? ☐ Yes ☐ No

Date of most recent contact with merchant: ____/____/____

Contact Name:

How did you contact the merchant? ☐ Phone ☐ Email ☐ Letter ☐ In person

Please describe the attempt to resolve with the merchant:

Additional Details:

Cardholder Signature: _____ Date: _____