



Cardholder Disputed Item Statement

Name _____ Home Phone () _____
 Address _____ Work Phone () _____
 _____ Cell Phone () _____
 Card Number _____ Account Number _____
 E-Mail Address _____

Type of Loss : Lost Stolen Card was in my possession at the time the transaction(s) occurred.

Date Cardholder Discovered Loss: ___/___/___ Date of First Fraudulent Transaction: ___/___/___

Date Cardholder Reported Loss to Credit Union: ___/___/___

Name of Unauthorized User (if known): _____

Address of Unauthorized User (if known): _____

I have examined the charges on my statement and question the following transaction(s) (attach additional sheets if necessary):

Merchant Name	Amount	Transaction Date
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

The following explains my dispute:

_____ I received a price adjustment (credit slip) on the above transaction and it has not appeared on my statement. I have included a photocopy of the credit slip.

_____ I certify that only one transaction was made with the above referenced merchant. On my statement, the same merchant has processed a second charge to my account, which I neither participated in nor authorized.

_____ I certify that I participated in the above transaction, but have not received the merchandise. (Describe your attempts to resolve the matter with the merchant as well as the expected date of delivery on the additional space provided).

_____ I contacted the merchant on _____ and canceled the monthly recurring transaction. (Merchant cancellation policies may apply; please provide full details on the additional space provided).

_____ I contacted the merchant on _____ and canceled my reservation. (Please provide full details on the additional space provided).

_____ My cancelation number is _____.

_____ I was not given a cancelation number.

_____ The shipped merchandise I received is defective. (Describe in the additional space the defect or damage and attempts to return the merchandise, and the merchant's response).

_____ The merchandise/services were not as described. (If purchase was made over the phone please indicate what was not as described. Otherwise, please provide written documentation as to what was not as described. i.e.: color, quality, etc.)

_____ I would like a copy of the sales draft. (Reason for request) _____

_____ I certify that the charge(s) was (were) not made by me or by a person authorized by me to use my card, nor were the goods or services represented by the above transaction received by myself or by a person authorized by me. (Your card will be blocked).

_____ Other. Describe below. Description of transactions should be typed or written clearly. Attach additional sheets if necessary.

In dispute cases except those related to lost/stolen/counterfeit cards, you are required to make an attempt to resolve the dispute with the merchant prior to filling a dispute. Please describe your attempt to resolve in the following sections:

Attempt to Resolve Information:

- I have made an attempt to resolve with the merchant (select one) YES NO
- Date of contact: _____
- Contact method: Telephone E-mail In-person Other (describe)
- Merchant's response: _____
- If no attempt, why not? _____

Additional Comments:

Cardholders Signature: _____ Date: _____

Employee Name: _____ Employee Signature: _____

Teller Number: _____ Date: _____