## **CARDHOLDER DISPUTE FORM**

Credit/Debit Account #	Cardholder Name	
(16 Digit	Card Number)	
Cardholder Phone #	Disputed Amount \$	Post Date
Merchant Name	Disputing more than	one item? Yes No
If Yes, then this is number of	f (e.g. 1 of 3) <b>ONLY</b> <u><b>ONE</b></u> <b>TR</b>	ANSACTION PER FORM
Email Address		
SIGNATURE REQUIRED _		
	HARGE, YOU MUST MAKE HE DISPUTE WITH THE ME	
Select T	Type of Dispute (Check ONLY	one)
☐ <b>Did not recognize</b> – Please a	ttempt to contact the merchant prio	r to disputing the charge.
When did the Cardholder	contact the Merchant? (mm/dd/yy)	/
• What was the outcome of	f the merchant contact?	
posted more than once. All ca	le purchase – Cardholder certifies eards issued to me are in my posses  Post date	ssion
Invalid Transaction \$	Post date	
merchant of cancellation.	- Please enclose copy of <b>letter</b> , <b>ema</b> contact the merchant?	
• Reason for cancellation?		
Date of cancellation	Cancellation #	
• Were you advised of a ca	ncellation policy? Yes No	
If Yes, what were you to	ld?	
exercising this right. Please a	- You must attempt to return the m	edit slip.
Was merchandise suitabl	e for the purpose intended?	
Merchant's response		



Ш	<b>I did not receive the merchandise -</b> Please contact the merchant and notify us of the outcome.		
	When did the Cardholder contact the merchant?/		
	What was the outcome of the merchant contact?		
	What was the expected delivery date?/ Pickup date?/		
	• Did the Cardholder cancel with the merchant? No Yes		
	If yes, when?/ How?		
	What was the merchandise that was ordered?		
	I was overcharged for the purchase - Please include a copy of the signed sales receipt.		
	My credit posted as a sale - Please attach a copy of the credit slip and the original sales slip.		
	The credit did not post to my account - Please enclose a copy of the dated credit slip or		
	notice of credit from the merchant and a detailed explanation of your dispute.		
	<ul> <li>I paid by other means - You <u>must</u> provide proof of paid by other means such as a copy of the cancelled check (front and back), a cash receipt, or a billing statement from another credit card .</li> <li>When did the Cardholder contact the merchant?//</li></ul>		
	What was the outcome of the merchant contact?		
	<ul> <li>I was charged for a hotel room, which I cancelled - Cancellation number is <u>required</u>.</li> <li>Were you advised of a cancellation policy? No Yes</li> <li>If Yes, what was the policy?</li> </ul>		
	• Cancellation number(REQUIRED) Cancel date//		
	<ul> <li>Copy of phone bill showing you contacted the merchant to cancel.</li> </ul>		
	Service Dispute - Please describe the nature of your dispute and your attempts at resolution on a <u>separate sheet of paper and attach to this form</u> . Include copies of second opinions from a certified merchant on their invoice or letterhead, repair bills, contracts or other supporting documentation.		
	<ul> <li>I did not authorize this charge - I certify that I did not authorize or participate in this transaction with the above-mentioned merchant, nor did I authorize anyone else to use my card. To use this option, you <u>must</u> report your card lost or stolen. If you have not, please call <a href="I-800-449-7728">1-800-449-7728</a> before sending in this form</li> <li>If this was for a hotel room, did you request a reservation? No Yes</li> <li>If Yes, this is <u>not</u> an unauthorized charge. You must call the merchant and attempt to resolve the dispute. If you received a cancellation number for a reservation, please see the</li> </ul>		
_	dispute reasons listed above.		
	<b>Other -</b> Please enclose a <b><u>DETAILED</u></b> description on a <b><u>SEPARATE SHEET</u></b> and <b><u>attach</u></b> it to this form.		

