

## NOTIFICATION OF DISPUTED TRANSACTION

### NOT ELSEWHERE CLASSIFIED

**Member Name:** \_\_\_\_\_ **Debit Card #:** \_\_\_\_\_  
**Home Phone #:** \_\_\_\_\_ **Work Phone #:** \_\_\_\_\_

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

For Fraudulent Transaction(s), Merchandise Not As Described/Defective, Cancelled Service/Merchandise or Merchandise/Services Not Received, please do NOT use this form. Please use appropriate form.

**I. Did the cardholder attempt to resolve with the merchant?**     Yes     No  
**If YES** – Spoke with: \_\_\_\_\_ On date: \_\_\_/\_\_\_/\_\_\_  
 Merchant’s Response: \_\_\_\_\_

**If NO** – Explain why not: \_\_\_\_\_

**II. I am disputing the transaction(s) in questions because of the following reason.** Please check one:

- The charge(s) was paid by another method.  
**Required Documentation: Include a copy of the cancelled check, cash/credit card receipt or other payment instrument.**
- I returned the merchandise on \_\_\_/\_\_\_/\_\_\_ via  USPS  FedEx  UPS  Other: \_\_\_\_\_  
**Please provide a copy of the shipping receipt.**
- I have been billed multiple times for the same purchase. The original charge was posted to my account on \_\_\_/\_\_\_/\_\_\_ . **I am providing a copy of my credit union statement showing the multiple purchases.**
- I cancelled this recurring charge with the merchant on \_\_\_/\_\_\_/\_\_\_ .
- The transaction(s) posted to a closed account. The account has been closed since \_\_\_/\_\_\_/\_\_\_ and the merchant did not obtain an authorization.
- The transaction(s) was declined and the merchant posted it without proper authorization.
- The transaction(s) does not match any account number on the Credit Union’s Master File.
- The amount signed for on the sales draft differs from the amount the merchant posted to my account.  
**Attached is a copy of my sales draft showing the amount that I authorized.**
- I returned merchandise and have a signed credit receipt and the merchant has not posted my credit.  
**Please provide a copy of the credit report.**
- The transaction(s) occurred on an expired card. The expiration date of the card was \_\_\_/\_\_\_/\_\_\_ .
- The transaction(s) date is more than 30 days past the settlement date.

Member Signature \_\_\_\_\_ Date \_\_\_\_\_

**\*\*\*\* This form MUST be signed by the cardholder \*\*\*\***