

<u>Cardholder Disputed Item</u> <u>Statement</u>



| Name: | | Phone: | Phone: | | |
|---|---------------------|---------------------|---|---------|--|
| Street Address: | | Email: | | | |
| City, State, Zip: | | Card Number: | <u> </u> | | |
| Type of Loss: | Card was in I | my possession at t | he time the transaction(s) occurred | | |
| I have examined the charge(s) on | | uestion the follow | | | |
| Merchant Name: | Amount: | | Transaction Date: | | |
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| The following explains my dispute | : | | | | |
| I received a price adjustment (| credit slin) on the | ahove transaction | n and it has not appeared on my state | ment | |
| I have included a photocopy o | | | Tana it has not appeared on my state | | |
| | · | h the above refere | enced merchant. On my statement, th | 16 | |
| • | | | ich I neither participated in nor autho | | |
| _ | • | • | received the merchandise. (Describe | | |
| · · · · · | | | expected date of delivery on the addi | • | |
| | he ahove transac | tion but have retu | urned the merchandise/ cancelled ser | vices | |
| | nerchant's instru | ctions and have no | t received credit. (Merchant cancella | | |
| | | - | curring transaction. (Merchant cance | llation | |
| policies may apply; please pro | | | | ilation | |
| | | | . (Please provide full details on the | | |
| additional space provided.) | and cancer | ed my reservation | . (Frease provide fail details of the | | |
| \square My cancellation numb | er is | | | | |
| ☐ I was not given a cance | ellation number. | | | | |
| The shipped merchandise I recattempts to return the merchandise | | | additional space the defect or damag e.) | e and | |
| ☐ The merchandise/services wer | e not as describe | d. (If purchase was | made over the phone please indicat | e | |
| | herwise, please p | | cumentation as to what was not as | | |
| ☐ I would like a copy of the sales | draft. Reason for | request: | | | |
| | | - | | | |

| (Your card will be blocked.) Other. Describe below. Descriptions 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 may be required to make an attempt to resolve the dispute with the merchant prior to filing a dispute. Please describe your attempt to resolve in the following section. It have made an attempt to resolve with the merchant. (check one) YES NO Date of contact: Contact method: Telephone Email In-person Other: Merchant's response: | Local certify that the charge(s) was/were not made by me or by a person authorized to use my card, n goods or services represented by the above transaction received by myself or by a person author | |
|--|--|--------------|
| sheets if necessary.) In dispute cases except those related to lost/stolen/counterfeit cards, you may be required to make an attempt to resolve the dispute with the merchant prior to filing a dispute. Please describe your attempt to resolve in the following section. It have made an attempt to resolve with the merchant. (check one) YES NO Date of contact: Contact method: Telephone Email In-person Other: Merchant's response: | | ized by file |
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| I have made an attempt to resolve with the merchant. (check one) | ttempt to resolve the dispute with the merchant prior to filing a dispute. Please describe your attended in the following section. | |
| Contact method: Telephone Email In-person Other: Merchant's response: If no attempt, why not? | • I have made an attempt to resolve with the merchant. (check one) \square YES \square NO | |
| Merchant's response: If no attempt, why not? | | |
| If no attempt, why not? | | |
| | • Merchant's response: | |
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| dditional comments: | If no attempt, why not? | |
| dditional comments: | | |
| dditional comments: | | |
| | Additional comments: | |
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| ardholder signature: Date: | 'ardholder signature' Date: | |