

Dispute Notification

NAME: _____ ACCOUNT NUMBER: _____

MERCHANT NAME: _____ TRANSACTION AMOUNT: _____ DISPUTED AMOUNT: _____

CITY/STATE _____ TRAN DATE: _____ POST DATE: _____

- () **DUPLICATE TRANSACTION.** I have been billed more than once by the same merchant for the same transaction.
- () I do not recognize the above transaction(s) transaction. I have made a good-faith effort with my card company/Merchant to identify the transaction.
- () Although I did engage in at least one transaction with the merchant, I am still in possession of all valid card(s) on my account, and did not authorize or give anyone else authorization to engage in the above transaction(s). Please provide a copy of the authorized transaction receipt.
- () **MERCHANDISE NOT RECEIVED.** The merchandise was to be shipped. The merchandise was not received by me, nor anyone authorized by me. I expected to receive the merchandise on ___/___/____. An attempt was made by me to resolve this dispute with the merchant.
- () **DEFECTIVE SHIPPED MERCHANDISE.** I received shipped merchandise that was damaged and I attempted to return it on ___/___/____. If only part of the merchandise was damaged, please state dollar amount of damaged portion \$_____. Please provide a copy of your proof of return receipt signed by the merchant. State what attempt has been made to resolve with the merchant. _____.
- () **RETURNED MERCHANDISE.** Please state in writing if you requested credit from the merchant and the reason the merchandise was returned. i.e. wrong size, color, quantity, etc. Include a copy of your return receipt signed by the merchant, the tracking number, with a copy of your credit slip or voucher.
- () **PAID BY OTHER MEANS.** I have contacted the merchant and attempted to resolve this matter. I am providing proof of other payment such as copy of front and back of a canceled check or cash receipt.
- () **HOTEL RESERVATION.** The cancellation number given to me by the hotel is _____. If you do not have the number, please obtain it from the hotel so that we may process the credit. If a cancellation number is not available provide the name of the person that took the request.
- () **AIRLINE TRANSPORTATION.** Airline transportation or other services to be provided on ___/___/___ were not received by me or anyone authorized by me. State the disposition of the airline tickets. _____.
- () **SERVICE DISPUTES.** If you have a problem with the quality of merchandise or services that you purchased, and you have tried to resolve this matter with the merchant, please include a detailed letter explaining the nature of the dispute and the results of your attempt to resolve this with the merchant.
- () **CREDIT NOT PROCESSED.** Please provide a credit slip bearing your account number, merchant name and dollar amount to be credited or written acknowledgment from the merchant consenting to a refund.
- () **DIFFERENCE IN AMOUNT.** The amount on my sales slip differs from the amount I was billed. Enclose a copy of your sales slip.
- () **RECURRING TRANSACTION.** I did engage in the above transaction, which was to be billed on a monthly/annual basis. I contacted the merchant on ___/___/___ to cancel my authorization. Please supply phone number or copy of letter sent to the merchant.
- () **CREDIT POSTED AS A PURCHASE.** The transaction posted to the account should be a credit. Attached is a copy of the credit that is due.
- () **MERCHANT IS OUT OF BUSINESS.** The merchant is no longer in business and can not supply goods or services.
- () **ATM NO CASH DISPERSMENT.** ATM machine did not dispense the requested cash. Please attach a copy of the decline slip.

COMMENTS OR FURTHER EXPLANATIONS SHOULD BE PROVIDED ON A SEPARATE SHEET OF PAPER.

_____/_____/_____
Date

Signature

(_____)_____
Day Phone #