

Notification of Disputed Transaction
Cancelled Service/Merchandise, Merchandise/Services Not Received

FORM 2

Member Name: _____ Debit Card Number: _____
Card Expiration: _____
Transaction Date _____ Settlement Date _____ Merchant Name _____ Transaction Amount _____

What was purchased? () Merchandise () Services

Describe the merchandise/service ordered:

I. For Merchandise/Services Not Received, please answer the following questions and complete the ATTEMPT TO RESOLVE section at the bottom:

Date of expected receipt of the merchandise/service: _____

Was the merchandise/services canceled due to Non-Receipt? _____ If so what was that date: ____/____/____
M D Y

If a cancellation number was given, what was that number? _____

For canceled Hotel Reservations, did the merchant provide a cancellation number () Yes () No

If YES please provide the cancellation number _____

If NO, did you ask for a cancellation number? _____ If you did **what was the merchant's response:**

II. For Canceled Services/Merchandise, please answer the following questions and complete the ATTEMPT TO RESOLVE section at the bottom:

Date Canceled: ____/____/____ How? () By Phone () By e-mail (please provide copy)
M D Y

Cancellation reason: _____

Did you receive any merchandise? _____ What date did you receive the merchandise? ____/____/____.
M D Y

If merchandise was returned, please provide date returned ____/____/____ and by what method (i.e.: UPS, FedEx, UPS):_____. Please included any proof of return to support the dispute.

III. ATTEMPT TO RESOLVE:

IMPORTANT – You must attempt to resolve prior to filing a dispute per VISA Regulations. Please describe the cardholder's attempt to resolve this dispute with the merchant and the last date of contact with the merchant and what the merchant's response was.

Date of last contact with merchant: ____/____/____ **and Contact Name at merchant:** _____

How did you contact the merchant? () by phone () by e-mail () by letter () in person

Please provide copies of e-mails and letters sent to the merchant and any responses received from the merchant.

Please describe the attempt to resolve with the merchant:

****The cardholder is not required to sign this form****

Member Acct # _____ Teller Initials: _____