

CARDHOLDER STATEMENT OF DISPUTE



SIGNATURE FORM

Please fill out this form completely and accurately. Only the person whose name is on the card should complete this form. Failure to answer all questions clearly will result in a delay in resolving your dispute.

Cardholder Name (Please print or type)	16 Digit Card Number:

Please list the disputed transaction(s) below (additional space is provided on page two).

Merchant Name	Transaction Amt	Transaction Date	EFT Web Reference #	23 Digit ARN = Acquirer's Reference Number

A. Were you in possession of the card at the time of the transaction? ☐ Yes ☐ No

B. If No, what happened to the card? ☐ Lost ☐ Stolen ☐ Other _____

C. Do you certify that the card was lost / stolen prior to these transactions? ☐ Yes ☐ No

Please check one option below that best applies to your dispute.

- ☐ 1. I certify that I did not authorize or participate in the transaction(s) listed above, nor were the goods or services represented by the transaction received by me. Attached is a detailed letter explaining my dispute (i.e. lost wallet, home was broken into, etc)

Please note that Regulations require you to contact the merchant and attempt to resolve your dispute before we will be able to assist you with the following situations. Complete the required Cardholder Questionnaire that applies to your dispute as supporting documentation.

- ☒ 2. I have been billed for an incorrect amount. The amount of the charge on my sales draft was \$_____ but the amount posted to my card was \$_____. For altered transaction amount you must supply a copy of the sales draft.
- ☐ 3. Although I did engage in a transaction with the merchant, I was billed for a transaction(s) that I did not engage in, nor anyone else authorized to use my card. Attached is a copy of my sales slip for the valid charge.
- ☐ 4. I have not received the merchandise I ordered and expected to receive on _____ (Date). I have contacted the merchant for a credit.
- ☐ 5. Although I did engage in the transaction(s), I am disputing the quality of the goods or services I received. I have contacted the merchant and I either did not receive a credit or I am still unsatisfied. Attached is all documentation to support my claim.
- ☐ 6. I have been billed twice for the same purchase. The original transaction was posted on _____ (Date). The second transaction was posted on _____ (Date).
- ☐ 7. I cancelled this service/reservation with the merchant on _____ (Date).
- ☐ 8. Merchandise, which was shipped to me, has arrived damaged, defective, and/or different from what I ordered. Attached is proof of return.
- ☐ 9. I have returned merchandise and requested a credit from the merchant. I returned the merchandise on _____ (Date).
- ☐ 10. I paid for this purchase by other means. Attached is a copy of the front and back of the cancelled check/cash receipt/money order or proof of other payment by other means (e.g. credit card statement).
- ☐ 11. Other: See attached detailed statement/letter of dispute.

Signature: _____ Date: _____

When complete, forward to Account Services		
Institution Name: Central Bank	Institution No.: 908	Phone: 832.485.2515
Institution Contact: Donna Darnell		Fax: 713.868.3317
Date card # was hotcarded:	Date card # placed on MC Warning Bulletin/Visa Exception File:	

(Continued from page one) **Please fill out this form completely and accurately. Only the person whose name is on the card should complete this form. Failure to answer all questions clearly will result in a delay in resolving your dispute.**

Cardholder Name (Please print or type)	16 Digit Card Number:

[illegible]