

Dispute Information Form

Card #:

Cardholder Name: (please print)

First: _____ Last: _____

Please check only one statement that pertains to the dispute claim being filed and provide the information requested. Any missing information will result in delayed provisional credit and may affect dispute resolution.

The templates below assume the cardholder's perspective.

Incorrect Amount (I was billed the wrong amount)

What was the amount you should have been billed? _____ (Please provide a receipt if available)

What was purchased? _____

Please describe your attempt to resolve this dispute with the merchant in the space for **additional information** below.

Duplicate Charge (I have been billed more than once for the same transaction)

What was purchased? _____

Please provide a copy of the statement and identify which charge is valid and which is a duplicate.

Paid by Other Means (I paid for this transaction via another payment method or credit card)

What was purchased? _____

Paid by: (Circle One) Check Cash Another Credit Card Other _____

Please describe your attempt to resolve this dispute with the merchant in the space for **additional information** below.

Please provide a copy of your cash receipt, the front and back of your cancelled check or a copy of your statement if another credit card was used.

Cancelled (I was charged for something I previously cancelled)

What was purchased? _____

Were you advised of the merchant's cancellation policy? _____

If so, how were you advised? _____

What was your method of cancellation? (Circle One) Phone Mail Email Other _____

Date of cancellation: _____

Cancellation number and/or name of person you spoke with: _____

Please describe your attempt to resolve this dispute with the merchant and your reasons for cancellation in the space for **additional information** below.

If you cancelled by phone, please provide a copy of the telephone bill reflecting the call if available. If you cancelled by email, please provide a copy of the email correspondence.

Merchandise not as Described (The merchandise I received was damaged, defective, or not what I ordered)

What was purchased? _____

Date the merchandise was received: _____

Date you returned the merchandise or made it available for pick up: _____

Return authorization number or cancellation number if available: _____

Tracking number for returned merchandise: _____

Please describe your attempt to resolve this dispute with the merchant and how the merchandise you received was different from what was described in the space for **additional information** below.

Service not as Described (The service I received was not what I expected based on the description provided by the merchant)

What was purchased? _____

Date the service was received: _____

Date you cancelled or attempted to cancel the service: _____

Was merchandise received with the service? _____

If yes, please provide the following:

Date you returned the merchandise or made it available for pick up: _____

Return authorization number or cancellation number if available: _____

Tracking number for returned merchandise: _____

Please describe your attempt to resolve this dispute with the merchant and how the service you received was different from what was described in the space for **additional information** below.

Credit not Processed (I did not receive credit that was promised to me by the merchant)

What was purchased? _____

Expected date of credit: _____

Date merchandise or service was received: _____

Date merchandise or service was returned or cancelled: _____

If credit is for merchandise, please provide the following:

Date you returned the merchandise or made it available for pick up: _____

Return authorization number or cancellation number if available: _____

Tracking number for returned merchandise: _____

Please describe your attempt to resolve this dispute with the merchant and your reasons for cancellation/return in the space for **additional information** below.

Please provide a copy of the return receipt or proof of return, such as a postal receipt if applicable. Please provide any documentation you have, such as a credit voucher, that supports your claim the merchant promised you a credit.

Non-Receipt of Merchandise or Service (I did not receive the merchandise or service I ordered by the agreed upon date)

What was purchased? _____

Date you expected to receive the merchandise or service: _____

If merchandise, was it to be shipped or picked up? _____

Please describe your attempt to resolve this dispute with the merchant in the space for **additional information** below.

Additional Information (Please provide additional information required for the dispute type and a full description of your interaction with the merchant from purchase to your last contact. Attach additional pages if necessary.)

Amount	Date Paid	Payee/Merchant
\$		
\$		
\$		

Note: FIS has final responsibility to determine the correct reason code based on information provided and investigation results.



Electronic Funds Transfer Transaction Dispute Timeline & Disclosure Reminder

This abbreviated disclosure is designed to inform you of the timeline and provisional credit that may be issued during a disputed transaction process. This notice is an abbreviated section of a larger disclosure contained in our Membership Account Agreements and Disclosures. The full disclosures were issued at account opening. Additional copies of the full disclosure are available upon request and can also be located on our website.

You lose your Card or PIN

- If you notify the credit union within 2 business days after you learn of the loss; maximum loss to you is \$50.
- If you fail to notify the credit union within 2 business days after you learn of the loss, and the credit union can prove that we could have stopped someone from using your card or PIN without your permission if you had told us within 2 business days, then you could lose as much as \$500.
- If your statement shows a transaction that you did not make and you fail to tell the credit union within 60 days of the credit union mailing the statement; you could lose the entire account balance.

Error or Fraud Transactions

- If you notify the credit union within 60 days after we send you the statement on which the error appeared we will investigate the charges. You may notify us by phone; however we will require the notification in writing from you within 10 business days.
- Notification after 60 days will result in a loss suffered by you.
- If the investigation takes the credit union more than 10 business days, we will credit your account the amount you think is in error. **This is provisional credit.**
- We may take up to 45 days to investigate the error.
- In this provision, all references to 10 business days will be 20 business days if your notice of error was on a transaction(s) occurred within 30 days after the first deposit to your account was made.
- All references to 45 business days will be 90 business days if your error involves:
 - Was not initiated within a state;
 - Resulted from a POS MasterCard Debit card transaction; or
 - If your notice of error was on a transaction(s) occurred within 30 days after the first deposit to your account was made.
- We will notify you of the results from the investigation within 3 days after completing our investigation
 - **If we determine that there was no error, we will remove the provisional credit from your account, even if it takes your account to a negative balance.**
 - You do have the right to request copies of our investigation documents and to work with the merchant reporting the error or fraud directly.

By signing below, I _____, acknowledge that Credit Union of the Rockies may issue provisional credit to my account during the investigation period. I further acknowledge and understand that this provisional credit may be removed from my account pending the outcome of the investigation.

Member Signature

Date