

MASTERCARD DISPUTE PROCESS AND FORMS **MULTIPLE DISPUTE LISTING**

If you believe multiple debit card transactions on your account are in error or unauthorized by you, please complete the following forms and return them to the Credit Union.

Fill out and sign the attached Notification of Disputed Transaction – MasterCard and Multiple Dispute Listing forms.

- Each section must be filled out and the forms must be signed and dated.

Write a dated letter that includes the following information:

- The dates, dollar amounts, and merchants for the transactions in question.
- The reason for the dispute and explain what steps you have taken to resolve the problem with the merchant(s).
- Include your written signature.

Please include anything that will help us to be successful in winning your dispute. These can include:

- Invoices
- Correspondence with the merchant(s)
- Contracts
- If the merchandise is returned, please enclose a copy of return label, etc.

You must notify us no later than 60 days after the first statement is sent to you by the Credit Union on which the error of unauthorized transactions appeared.

We will acknowledge your letter within 10 days by granting provisional credit to your account. Within 120 days it will be determined if your claim has been denied. If denied, we will then notify you that the funds have been withdrawn from your account.

PLEASE NOTE:

If you are disputing an Internet transaction, make sure you notify the site or call their Customer Service Department and verify what you have agreed to with the Internet merchant before filing the dispute. This is especially true with recurring debits, as you may have agreed to service you did not realize. Ask the merchant to discontinue or cancel service and issue a credit back to your account. Please provide us with a dated copy of that request.

Notification of Disputed Transaction - MasterCard

Cardholder Name: _____

Card Number:

□□□□ - □□□□ - □□□□ - □□□□

1. Transaction Information - List 1st Transaction Below and the Remaining on the Next Page

| Transaction Date | Merchant Name | Dollar Amount |
|-------------------|---------------|---------------|
| 1. ____/____/____ | _____ | _____ |

2. Dispute Reason/Elaboration

I am disputing the transaction(s) in question because of the following reason(s):

The transaction(s) listed below are unauthorized.* No one authorized to use this account signed for or participated in the transaction(s).

At the time of the transaction(s), please indicate status of card (*Please check one*):

Card Lost Date card was Lost ____/____/____ Card Stolen Date card was Stolen ____/____/____

Card still in Accountholder's possession. New or Reissue Card Never Received

If cardholder still in possession of card is counterfeit card use suspected? Yes No

The charge(s) was paid by another means. Enclosed is a copy of the cancelled check/cash/credit receipt or account statement.

The amount signed for on the salesdraft differs from the amount billed on the monthly statement. Attached is my copy of the sales receipt.

The transaction was authorized and then canceled. A credit voucher was issued (copy enclosed), but the credit has not posted to my account. If no credit voucher was issued, please explain the merchant's response to the cancellation/return.

I have been billed multiple times (2 or more) for the same purchase. The original charge posted to my account on ____/____/____.

I placed an order with the merchant above. I have not received merchandise which I expected by ____/____/____. I have contacted the merchant for credit but no credit has posted to my account.

I cancelled this reservation on ____/____/____. The cancellation number provided to me is as follows: _____.

I cancelled this recurring charge with the merchant on ____/____/____. No charges after this date are authorized from this merchant.

I received merchandise different from what I ordered. Attached is a detailed letter explaining what was expected from the merchant, what was received, and that an attempt to return the merchandise was made.

Cardholder Signature

Date

*If additional room is required to describe your dispute, please use the back of this form

