

Dispute Information Form

16 digit card #

Cardholder Name: (please print)

First:

Last:

Please check only one statement that pertains to the dispute claim being filed and provide the requested information
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?

Detailed description of what was purchased:

Please provide a receipt, if available.

Please describe your attempt to resolve this dispute with the merchant with date of contact.

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

Detailed description of what was purchased:

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

Please describe your attempt to resolve this dispute with the merchant with date of contact.

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

Detailed description of what was purchased:

Paid by: Check Cash Different Card Other - please specify:

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

Please describe your attempt to resolve this dispute with the merchant with date of contact.

Canceled (I was charged for something I previously canceled)

Detailed description of what was purchased?

Reason for cancellation:

Were you advised of the merchant's cancellation policy? Yes No

If yes, how were you advised?

What was your method of cancellation? Phone Mail Email Other - please specify:

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 date of contact.

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

Detailed description of what was purchased:

Date merchandise was received:

Date merchandise was returned or made 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 with date of contact and provide detailed description of how the merchandise was different than described.

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

Detailed description of what was purchased:

Date the service was received:

Date you canceled or attempted to cancel the service:

Was merchandise received with the service? Yes No

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 with the merchant with date of contact and provide a detailed description of how the service was different than described.

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

Detailed description of what was purchased:

Date the credit was expected:

Date you received the merchandise or service:

Date you canceled or attempted to cancel the service:

Was merchandise received with the service? Yes No

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

Please describe your attempt of resolve with the merchant with date of contact.

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

Detailed description of what was purchased:

Date the merchandise or service was expected:

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

Please describe your attempt to resolve this dispute with the merchant with date of contact.

Additional Information

16 digit card #:

Cardholder Name (please print)

First:

Last:

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.