



Customer Dispute Request (#513)

Complete the fields below, obtain the cardholder's signature and submit this form via SHAZAM Access.

Card Information

PAN: *First Six Digits*

Last Four Digits

Date of Hot-Card with Pickup Response:

Cardholder Name:

Date of Last Valid Transaction:

Disputed Transactions

Date: Amount: \$ Merchant Name:

Date: Amount: \$ Merchant Name:

Date: Amount: \$ Merchant Name:

Date: Amount: \$ Merchant Name:

I've attempted in good faith to resolve this dispute with the merchant.

No Yes (If Yes, include details below.)

At the time of the transaction, the card was: ☐ Lost ☐ Stolen ☐ In my possession

Category

Check one category below that best describes your dispute for the transactions listed above. **Please Note:** Complete a separate form for each transaction if more than one category applies.

☐ **Unauthorized/Counterfeit Chip Transaction**

I didn't authorize or engage in the transaction. The card is hot-carded.

☐ **Returned Merchandise**

I returned merchandise to the merchant on _____ (date).

A copy of the delivery carrier receipt is enclosed.

☐ **Debit Card Account Billed Twice**

I was incorrectly charged \$ _____ on _____ (date).

The correct transaction for \$ _____ posted on _____ (date).

☐ **Defective Merchandise/Not as Described**

The merchandise arrived broken, defective or otherwise unsuitable OR the product or service received was not as described by the merchant. The merchant's advertisement and a letter explaining what I expected to receive are enclosed. I returned or attempted to return the merchandise on _____ (date).

☐ **Merchandise or Service Not Received**

I didn't receive the merchandise or services I expected to receive on _____ (date). A detailed description of the merchandise or services purchased: (limit of 100 characters):

☐ **Credit Slip Issued and Not Processed**

I was issued a credit receipt that didn't post to my account. A copy of the credit receipt is enclosed with this form.

☐ **Canceled Services/Merchandise/Reservation**

I canceled the services/merchandise/reservation on _____ (date). However, the merchant continues to bill me. The reservation cancellation number is: _____.

☐ **Paid by Other Means**

I paid for this transaction using cash, check or another bank card. A copy of my cash receipt, canceled check or other bank card statement is enclosed.

☐ **Incorrect Amount**

I was billed \$ _____, but the correct amount is \$ _____. Evidence of the correct amount is enclosed.

☐ **Non-fraud Digital Goods \$25 or Less — MasterCard Only**

The merchant didn't offer purchase control settings.

Cardholder Signature

Cardholder Signature (must be the name listed on the card)

Date