

Cardholder Disputed Item Statement

	ABC	UT YOU	
Name:		Date Submitted:	
Mailing Address:		Home Or Cell Phone:	
City:		Work Phone:	
State:		Account Number:	
Zip:		Full Card Number:	
Email Address:		Card Is In My Possession:	Yes No No
Disposition Of Card at time of transaction(s):	Select	Date Loss Discovered:	
Date Loss Reported:		Date First Fraud Tran:	
Police Report Number:		Police Agency:	
	ABOUT THE	TRANSACTION(S)	
I have examined the char	ges on my EDCU credit or de	bit card and dispute the follow	ing transactions:
Merchant Na	me or ATM Location	Amount	Transaction Date
	ABOUT 1	THE DISPUTE	
Please select the BEST de	scription for your dispute:		
		increased from \$ quired to be submitted with th	
	copy of the sales slip is re I received a credit adjustn		is statement. e credit has not posted. A
	copy of the sales slip is re I received a credit adjustn copy of the credit receipt	quired to be submitted with the	is statement. e credit has not posted. A th this statement.
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	The charge(s) above was not made by me or a person authorized by me, nor were goods or services represented by the transaction received by me or a person authorized by me.			
	My card is Lost or Stolen			
	Other. You must attach a written explanation describing the details of your dispute.			
MY ATTEMPTS TO RESOLVE				
attempt to contact the m	listed above except Lost of Stolen card, the cardholder is required to make a good faith erchant to resolve the dispute. This must occur before we can begin out internal ou any credits or provisional credits. Please be as detailed as possible.			
Date of First Attempt:	First Attempt Outcome: <u>Select</u>			
Date of Second Attempt:	Second Attempt Outcome: <u>Select</u>			
Comments:				
MY CERTIFICATION				
 I did not give, sell I have no knowled the first fraudulen I did not receive at a large of the first fraudulen I did not use my control unauthorized use I have examined a transaction nor at a transaction nor at a further, I did not research if applicable (draft of apply ONLY if the charge (authorized by me. I give consent to EDCU to federal law enforcement of the responsible for fraud in and understand that mak punishable by fine and/or 	If of the unauthorized transactions and in each instance I did not originate the uthorize it. In proceeds or benefits from any of those transactions. If ponsible for chargeback processing fee of \$15.00 and draft copy fee of up to \$12.00 topy fee is \$25.00 each for travel and entertainment type merchants). These fees will (s) in dispute prove to be legitimate charge(s) authorized by me or by a person In release any information regarding my card and/or account to any local, state and agency to be used in the investigation and/or prosecution of any person(s) who may involving my card and/or account. I certify the information on this statement is true ting a false statement is subject to federal and/or state statutes and may be imprisonment.			
Signature	Date			
	FOR EDCU USE			
 Please ensure all r Visa. 	documentation such as receipt copies, correspondence and signed statements. member contact information is complete in the About You section as this is required by			
	ompleted package to card department for investigation and credit.			
Staff Submitting:	Are we Blocking Card? <u>Select</u>			