

Statement of Occurrence for Fraudulent or Disputed **Transactions**

This form will help MCCU complete an investigation regarding your claim for a disputed or fraudulent transaction on your account(s) with us. Please fill out this form in its entirety.

I am filing a claim for:

A Debit Card Dispute Debit Card Fraud Check Fraud An Unauthorized ACH

Your Name: _____ Affected acct. number(s) _____

Please tell us in your own words what happened:

I represent and warrant that I have disclosed all facts as I know them.

Signature

CARDHOLDER DISPUTE FORM

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Cardholder Name	
Card Number	
Transaction Date Merchant Name	
Transaction Amount \$ Dispute Amount \$	
Cardholder Signature	Date
Please check the appropriate box below that matches your dispute type. Return this form and any supporting documents so that your dispute can be processed in a to <u>The required fields per dispute type are marked with an asterisk (*).</u> Attach a separate so of the below does not accurately reflect your dispute, please write a separate letter an	imely manner. Please answer all appropriate questions below. heet or letter if more room is needed for your explanation. If any
Transaction not recognized by cardholder	
Were you advised of any cancellation policy? Yes No (If yes, explain)	
* Date of cancellation: Spoke with:	
* Cancellation number:	
* Reason for cancellation:	
I cancelled this recurring transaction with the merchant date:	how
* Describe your attempt	
to resolve with the merchant:	
Returned merchandise dispute	
* Date returned: Date received by merchant:	
If mailed, Return Merchandise Authorization Number (RMA):	
* Shipping Company: Tracking nur	nber:
* Reason for return:	
 If you have a credit slip or voucher or a refund acknowledgement that 	has not posted please provide:
Date of credit slip: Invoice/receipt number of the	credit:
Describe your attempt	L
to resolve with the merchant:	
□ I was charged two or more times for the same transaction	
* Date of first charge: * Date of second charge:	
Date of third charge: Date of fourth charge:	
Describe your attempt to resolve with the merchant:	
□ □ I did not receive cash from an ATM withdrawal attempt but was charged as i	f I did receive it
Transaction reference number:	
I made a single attempt and did not receive cash	
I made multiple attempts and only received cash on one of those a	attempts
C Other	

	CARD		PAGE OF
\square I paid for these goods or services by other means			
* 🗖 check 🗖 cash 🗖 other Bank Card 🗖 Other			
* Describe your attempt to resolve with the merchant:			
*Note: if selecting this dispute reason, you must supply a copy of proof of other means of payment. Proof can include another Bank Ca	ard statement, copy of	the front and back of a canc	eled check or a cash receipt.
☐ Non-receipt of goods or services			
Select One: O Merchandise not Received O Service no	tReceived		
* What service or merchandise was ordered?			
* I expected delivery/services on (date): * Merchant unwilling or unable to provide service: Yes N	^{lo} (if yes, explain)		
* Describe your attempt to resolve with the merchant.			
* Merchant Response: * If no merchant response, explain:			
A credit transaction posted as a debit in error			
* A credit for \$ was posted to my account a	s a debit.		
You must supply a copy of the credit receipt rece		t.	
* Describe your attempt to resolve with the merchant:			
Incorrect Transaction Amount			
* The amount of this transaction posted for \$	but should have pos	sted for \$	
If available please supply a copy of your receipt.			
* Describe your attempt to resolve with the merchant:			
Quality of services or goods, defective merchandise or not as described			
Select one: O Merchandise was defective or not as described	C Service was	defective or not as described	
*Describe the difference between what was ordered and what was re	ceived or provide copy	of written purchase order.	What was defective or why
the purchase is unsuitable for your needs.			
*Date cardholder received merch. or service	handise returned:	Date received b	by merchant:
If mailed, Return Merchandise Auth. #:			
* Shipping Company:	Tracking n	umber:	
If you have a credit slip or voucher or a refund ac	knowledgement that ha	as not posted please provide	e with dispute.
*Date services cancelled: How?			
* Describe your attempt to resolve with the merchant:			
Additional information: Please use an additional sheet of paper, if neces	sarv		
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