## Cardholder Letter/In-Take Form

Nam	ie:		Home Phone:		
Street Address:			Work Phone:	Work Phone:	
City, State, Zip:			Card Number:	Card Number:	
Ema	il:		EMV Chip Card?	Yes No	
	of Loss: Lost			at the time the transaction(s) occurred.	
1100	showt Nove o	Amazont		Transaction Date:	
ivier	chant Name:	Amount:		Transaction Date:	
A	dditional disputes on back pa	age			
The fo	ollowing explains my dispute	(Choose only a single	e box in either Fraud D	isputes or Non-Fraud Disputes):	
ED ALL	D DICTUITE NO ATTEMPT TO	CONTACT IS DECLUDE:	D DV CARDUOIDED		
FRAU	D DISPUTE – NO ATTEMPT TO	CONTACT IS REQUIRED	D BY CARDHOLDER		
				n authorized by me to use my card, nor	
	by me. <b>(Card will be block</b>	•	above transaction rec	eived by myself or by a person authorized	
	by me. (card will be block	eu.,			
NON-	<mark>FRAUD DISPUTE</mark> – AN ATTEMI	PT TO CONTACT THE N	MERCHANT TO REMEDY	DIPSUTE MUST BE MADE BY CARDHOLDER	
	I certify that I participated I purchased:	in the above transac	ction but have not reco	eived the merchandise/service.	
	•			ted to receive, the expected date of on the additional space provided))	
	I certify that I participated in the above transaction but have returned the merchandise/cancelled services on (date) per the merchant's instructions and have not received credit. (Merchant cancellation policies may apply; please provide full details on the additional space provided.)				
	I contacted the merchant on and canceled the monthly recurring transaction. (Merchant cancellation policies may apply; please provide full details on the additional space provided.)				
	I contacted the merchant on and canceled my reservation. (Please provide full details on the additional space provided.)  My cancellation number is  I was not given a cancellation number.				
	I received a price adjustmo		e above transaction a	nd it has not appeared on my statement.	

## Cardholder Letter/In-Take Form

	I certify that only one transaction was made with the above referenced merchant. On my statement, the same merchant has processed a second charge to my account, which I neither participated in nor authorized. The correct amount was					
	The shipped merchandise I received is defective or damaged. (Describe in the additional space the defect or damage and attempts to return the merchandise, and the merchant's response.)					
	The merchandise/services were not as described. (If purchase was made over the phone please indicate what was not as described. Otherwise, please provide written documentation as to what was not as described. ie: color, quantity, etc. Counterfeit claims need to be backed up by expert opinion.)					
dispute becom	ute cases <u>except</u> those related to Fraud-type disputes, you are required to with the merchant prior to filing a dispute. If no attempt is made for a Coes invalid. Please describe your attempt to resolve in the following section to Resolve Information:	onsumer-type dispute, dispute				
•	I have made an attempt to resolve with the merchant. YES NO					
•	Date of contact:					
•	Contact method: Telephone E-mail In-person Oth	ner(describe)				
•	Merchant's response:					
•	If no attempt, why not?					
Addition	onal Comments:					
Cardho	lder Signature	Date:				
		FI Internal Use Only:				

Page | 2

If applicable, date the card was blocked: \_\_\_\_\_

## Cardholder Letter/In-Take Form

Merchant Name:	Amount:	Transaction Date: