



ROAD TO A STRONG FINANCIAL FUTURE

Notification of Disputed Transaction

Member Name: _____
Address: _____

Home Ph: _____
Work Ph: _____
Cell Ph: _____
Email: _____

Account #: _____

Account Type (circle one):

Share Draft / Visa Credit / Visa Debit / ATM

Card #: _____

Signature: _____

Date: _____

If a transaction appears on your statement that you believe is an error, and you have been unable to resolve the situation with the merchant, please complete and sign a copy of this form using blue or black ink. This form must be received at the credit union address stated below **within 60 days of the closing date as printed on your statement**. Please include a copy of your statement highlighting the disputed transactions and send to: WUHEFCU, 194 First Street, Mineola, NY 11501.

Transaction Amount: \$ _____

Transaction Date: ____/____/____

Disputed Amount: \$ _____

Reference #: _____

Merchant Name: _____

I contacted the merchant on ____/____/____ (date) in an attempt to resolve this dispute.

- I certify that the debit or charge listed above was not made by me or a person authorized by me to use my account or card. In addition, neither I, nor anyone authorized by me received the goods or services represented by this debit or charge.
- I certify that I did not participate in nor authorize the above referenced mail order or telephone order transaction. I understand that no signed or imprinted sales slip copy is available for verification purposes.
- Although I did participate in a transaction with the merchant, I was billed for _____ transaction(s) totaling \$ _____ that I did not participate in, nor did I authorize anyone else to use my account or card. I do have all my drafts or cards in my possession. Enclosed is a copy of my sales slip for the valid charge.
- I have not received the merchandise that was to have been shipped to me. Expected date of delivery was _____ (mm-dd-yy). I contacted the merchant on _____ (mm-dd-yy) and the merchant's response was _____.
(In order to assist you more effectively, you must contact the merchant and inform us of their response.)

- I have returned merchandise on _____ (mm-dd-yy) because _____.
(Please provide a copy of the return receipt, or proof of return.)
- The attached credit slip was listed as a charge on my statement.
- I was issued a credit slip for \$_____ on _____ (mm-dd-yy), which did not appear on my statement. A copy of my credit slip is enclosed.
- Merchandise, which was shipped to me, arrived damaged and/or defective on _____ (mm-dd-yy). I returned it on _____ (mm-dd-yy). Merchant's response was _____.
A copy of credit slip and/or postal receipt is enclosed.
- I have been billed an incorrect amount. My account or credit card receipt shows \$_____. However, I was billed \$_____. (Please send a copy of your sales receipt).
- I have been billed more than once for the same transaction. I authorized only one charge with the merchant for \$_____. (Please send a copy of your sales receipt).
- I notified the merchant on _____ (mm-dd-yy) to cancel the preauthorized order (reservation). My cancellation number is _____. I was /was not (circle one) informed of the cancellation policy when I made the reservation. The reason I canceled was: _____.
(If you do not have a cancellation number, please provide a copy of your phone bill showing the date and time of the cancellation call.)
- I canceled the subscription/membership policy (circle one) which was charged to my account by the above referenced merchant on _____ (mm-dd-yy). I canceled the charge prior to the transaction date.
- The transaction was paid by other means. (Please provide a copy of cash receipt, or the front and back of your canceled check or a copy of your statement if another credit card was used.)
- Other: (Describe below. Please include what attempts have been made to contact the merchant and resolve.)

To expedite the processing of your dispute, *do not mail* this form with your payment.

Please remember to include the documentation to support your dispute.