

Notification of Disputed Transaction
Merchandise/Services Not Received

Cardholder Name: _____

Card Number: _____

Cardholder Signature: _____

1. Transaction Information

Transaction Date **Merchant Name** **Dollar Amount**

____/____/____ _____ _____

What was purchased? Merchandise Services

Describe the Merchandise/Services purchased:

2. Dispute Reason/Elaboration

Date of expected receipt of the Merchandise/Service: ____/____/____

Was Merchant unwilling or unable to provide Merchandise/Service? Yes No

Was the Merchandise/Services canceled due to Non-Receipt? Yes No If yes, what date? ____/____/____

If a cancellation number was given, what was that number? _____

If no cancelation number given, did you ask for a cancellation number? Yes No

If Yes, what was the merchant's response?

3. Attempt to Resolve Please note: You must make every effort to resolve with the merchant before you dispute a transaction

Did you attempt to resolve with the merchant? Yes No

Date of most recent contact with merchant: ____/____/____

Contact Name: _____

How did you contact the merchant? Phone Email Letter In person

Please describe the attempt to resolve with the merchant:

