DEBIT CARD DISPUTE FORM [FRAUD]

UniBank

Debit Card Number (16-digits)	Cardholder Name	Account Number

At the time of the unauthorized transaction, your card was:

☐ In my possession ☐ Lost ☐ Stolen

LIST OF FRAUDULENT TRANSACTIONS			INTERNAL USE ONLY
Transaction Date	**Amount**	**Merchant Name**	**Network**

I attest that I did not authorize or participate in any of the above transactions (check only one).

☐ My card has not been out of my possession.

☐ My card was lost on (date): _____

☐ My card was stolen on (date): _____

I understand that the debit card in which the fraud occurred will be blocked immediately upon receipt of this form.

If case was filed with law enforcement, please provide the following information.

Name of Agency: _____

File Date: _____ Case Number: _____

Cardholder Signature (Required)	Date

RESET