

DEBIT CARD DISPUTE FORM [NON-FRAUD]



Debit Card Number (16-digits)	Cardholder Name	UniBank Account Number
Merchant Name/Transaction Description		
Transaction Amount	Dispute Amount (If Different)	Transaction Date
Disputing more than one item? <input type="checkbox"/> Yes <input type="checkbox"/> No <i>If yes, complete a separate form for each transaction in dispute.</i>		
Was the merchant contacted to resolve the transaction? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, response provided from merchant:		
The above transaction is disputed for the following (select a reason):		
Product Issue: <input type="checkbox"/> Non-Receipt of purchased item and merchant has not issued refund <input type="checkbox"/> Product/services were not as described or defective and merchant has not issued refund <input type="checkbox"/> Purchased item returned and merchant has not issued refund		
Charge Discrepancy: <input type="checkbox"/> Duplicate charge for same purchase <input type="checkbox"/> Incorrect amount charged - 1. Authorized amount: \$ 2. Amount charged: \$ <input type="checkbox"/> Merchant has not issued credit by the expected credit date. Date credit was to be issued: <input type="checkbox"/> Services cancelled and merchant has assessed charges after cancellation effective.		
<input type="checkbox"/> Other If selecting other, please provide a detailed description of the reason for the disputed charge below:		
Customer Signature	Date	
INTERNAL USE ONLY		
Network: <input type="checkbox"/> VISA <input type="checkbox"/> MASTERCARD <input type="checkbox"/> INTERLINK <input type="checkbox"/> PLUS <input type="checkbox"/> PULSE <input type="checkbox"/> CIRRUS <input type="checkbox"/> NYCE <input type="checkbox"/> ACCEL <input type="checkbox"/> STAR		
Received By:	Branch:	