



VISA Debit Card Dispute Form

Complete the fields below and obtain the cardholder's signature

Card Number: _____

Cardholder Name: _____

Member Number: _____

Disputed Transaction

Date: _____ Amount: _____ Merchant Name: _____

Date: _____ Amount: _____ Merchant Name: _____

Date: _____ Amount: _____ Merchant Name: _____

Date: _____ Amount: _____ Merchant Name: _____

I have attempted in good faith to resolve this dispute with the merchant. ☐ No ☐ Yes (If yes, include the details below)

At the time of the transaction the card was: ☐ Lost ☐ Stolen ☐ In my possession

Category

Check one category below that best describes your dispute for the transaction or transactions listed above. **Please note:** Complete a separate form for each dispute if more than one category applies.

☐ **Unauthorized**

I did not authorize this transaction. For fraud only.

☐ **Returned Merchandise**

Returned merchandise to merchant on _____ (date). Copy of the delivery carrier receipt and/or bank card receipt enclosed.

☐ **Double Billing**

Incorrectly charged \$ _____ on _____ (date). Correct transaction for \$ _____ posted on _____ (date).

☐ **Defective Merchandise**

Merchandise arrived broken, defective, or otherwise unsuitable. I attempted to return the merchandise on _____ (date). My explanation of the defect is enclosed.

☐ **Merchandise or Service Not Received**

Did not receive merchandise or service I expected to receive on _____ (date).

Detailed description of merchandise/service purchased: _____

☐ **Not as Described**

Product or service received not as described by the merchant. I attempted to return the merchandise on _____ (date). Merchant's advertisement and letter explaining what I expected to receive enclosed.

☐ **Credit not Received**

Issued a credit receipt that did not post to my account. A copy of the credit receipt is enclosed with this form.

☐ **Cancelled Services/Merchandise/Reservation**

Cancelled the service/merchandise/reservation on _____ (date); however, the merchant continues to bill me. The reservation cancellation number is: _____

☐ **Paid by Other Means**

Paid for this transaction using cash, check, or other bank card. Copy of my cash receipt, cancelled check, or other bank card statement enclosed.

☐ **Other: Categories above do not describe situation**

A detailed letter describing my situation is enclosed.

☐ **Incorrect amount**

Billed \$ _____, but the correct amount is \$ _____. Enclosed is evidence of the correct amount.

Cardholder Signature (Required)

Date

Phone

Visa Dispute Description

Did you contact the merchant? Yes _____ No _____

If no, why? _____

What day/time did you speak with them? _____

In your own words, please give a detailed description of the dispute.

This image shows a single sheet of white paper with horizontal ruling lines. The lines are evenly spaced and run across the width of the page. There are no margins, text, or other markings on the paper.

Signature _____

Date _____