

Dispute Information Form

16 digit card #:

Cardholder Name: (please print)

First:

Last:

Please check only one statement that pertains to the dispute or fraud claim being filed and provide the information requested. The templates below assume the cardholder's perspective.

Incorrect Amount (I was billed the wrong amount)

What was the amount you should have been billed?

What was purchased?

- Please provide a receipt, if available.
- Please describe your attempt to resolve this dispute with the merchant in the space for **additional information** below.

Duplicate Charge (I have been billed more than once for the same transaction)

What was purchased?

- Please provide a copy of the statement and identify which charge is valid and which is the duplicate.

Paid by Other Means (I paid for this transaction via another payment method or credit card)

What was purchased?

Paid by: Check Cash Different Card Other:

- Please provide a copy of your cash receipt, the front and back of your canceled check or a copy of your statement if another credit/debit card was used.
- Please describe your attempt to resolve this dispute with the merchant in the space for **additional information** below.

Canceled (I was charged for something I previously canceled)

What was purchased?

Were you advised of the merchant's cancellation policy? Yes No

If yes, how were you advised?

What was your method of cancellation? Phone Mail Email Other:

Date of cancellation:

Cancellation number and/or name of person you spoke with:

- If you canceled by phone, please provide a copy of the telephone bill reflecting the call if available.
- If you canceled by email, please provide a copy of the email correspondence.
- Please describe your attempt to resolve this dispute with the merchant and your reasons for cancellation in the space for **additional information** below.

Merchandise not as Described (The merchandise I received was damaged, defective, or not what I ordered)

What was purchased?

Date the merchandise was received:

Date you returned the merchandise or made it available for pick-up:

Return authorization number or cancellation number, if available:

Tracking number for returned merchandise:

- Please describe your attempt to resolve this dispute with the merchant and how the merchandise you received was different from what was described in the space for **additional information** below.

Service not as Described (The service I received was not what I expected based on the description provided by the merchant)

What was purchased?

Date the service was received:

Date you canceled or attempted to cancel the service:

Was merchandise received with the service? Yes No

If yes, please provide the following:

Date you returned the merchandise or made it available for pick-up:

Return authorization number or cancellation number, if available:

Tracking number for returned merchandise:

- Please describe your attempt to resolve this dispute with the merchant and how the service you received was different from what was described in the space for **additional information** below.

Credit not Processed (I did not receive credit that was promised to me by the merchant)

What was purchased?

Expected date of credit:

Date merchandise or service was received:

Date merchandise or service was returned or canceled:

If credit is for merchandise, please provide the following:

Date you returned the merchandise or made if available for pick-up:

Return authorization number or cancellation number, if available:

Tracking number for returned merchandise:

- Please provide a copy of the return receipt or proof of return, such as a postal receipt, if applicable.
- Please provide any documentation you have, such as a credit voucher, that supports your claim the merchant promised you a credit.
- Please describe your attempt to resolve this dispute with the merchant and your reasons for cancellation/return in the space for additional information below.

Non-Receipt of Merchandise or Service (I did not receive the merchandise or service I ordered by the agreed upon date)

What was purchased?

Date you expected to receive the merchandise or service:

If merchandise, was it to be shipped or picked up? Shipped Picked Up

- Please describe your attempt to resolve this dispute with the merchant in the space for **additional information** below.

Additional Information (Please provide additional information required for the dispute type and a full description of your interaction with the merchant from purchase to your last contact. Attach additional pages, if necessary.)

**Cardholder
Signature:**

Date:

Note: FIS has final responsibility to determine the correct reason code based on information provided and investigation results.