



# Community Resource

## CREDIT UNION

P.O. Box 3181, Baytown, Texas 77522 • 1.800.238.3228 • [www.crcu.org](http://www.crcu.org)

### Debit Cardholder Merchant Dispute Form

#### Description:

- Form used when an initially authorized debit card transaction clears the account, but the details of the transaction are inaccurate

#### Instructions:

- Please fill out form completely and sign
- Completed form may be mailed or brought in to any CRCU branch location

For questions, please call our Member Contact Center at 281.422.3611 or visit any CRCU branch location.



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## Debit Cardholder Merchant Dispute Form

### Cardholder Information

Cardholder Name:		
Account #:	Account Suffix:	
Card Number:	Employee Name:	
Merchant Name:	Amount:	Transaction Date:

**Please choose a category that best describes your dispute (please attach receipt of transaction discretion):**

\_\_\_\_\_ The charge posted to my account twice, but I only authorized one purchase. The valid charge posted on \_\_\_\_\_. My debit card(s) are still in my possession. **(Attach a copy of the receipt showing the initial purchase.)**

\_\_\_\_\_ The charge posted to my account for an amount different from the amount on my receipt. **(Attach a copy of the receipt showing the difference.)**

\_\_\_\_\_ I have not received expected goods or services. The expected date of delivery/completion was \_\_\_\_\_. I have contacted the merchant and the response was \_\_\_\_\_.

**(Attach a copy of the receipt showing the purchase.)**

\_\_\_\_\_ The merchandise received was not as described, poor quality, damaged, or unsuitable for the purpose intended. I returned (or attempted to return) the merchandise on \_\_\_\_\_. I have contacted the merchant and their response to the return was \_\_\_\_\_.

**(Attach a copy of the receipt showing the purchase. Please provide details of what was wrong with the merchandise on the second page of the form, and include proof the goods were returned to the merchant, such as a tracking number.)**

\_\_\_\_\_ I have returned merchandise to the merchant. **(Attach a copy of the receipt showing proof of shipping.)**

\_\_\_\_\_ I contacted the merchant on \_\_\_\_\_ to attempt to return merchandise. I did not receive a credit slip because \_\_\_\_\_. I was/ was not (circle one) informed of the merchant's return policy, and their response to the return was: \_\_\_\_\_.

**(Attach a copy of the receipt showing the purchase.)**

\_\_\_\_\_ I cancelled the transaction with the merchant on \_\_\_\_\_. I was/ was not (circle one) informed of the merchant's cancellation policy, I have contacted the merchant and the response to the cancellation was \_\_\_\_\_.

**(Attach a copy of the receipt showing the purchase. Please include any contracts or correspondence to and from the merchant.)**

\_\_\_\_\_ I cancelled the hotel reservation on \_\_\_\_\_. My cancellation number is \_\_\_\_\_.

**(If no cancellation number was provided, please provide a telephone statement showing the cancellation call to the merchant.)**



# Community Resource

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### Debit Cardholder Merchant Dispute Form

**NOTE: Please provide a detailed explanation of the dispute:**

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A \$30 fee will be charged to the member if the dispute is denied and the transactions are determined as valid

Member Signature:	Date:
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