



### Cardholder Dispute Form

**NOTE - You must first contact the merchant to resolve before a dispute can be filed. Failure to contact the merchant may affect your dispute rights.**

Have you attempted contacted the merchant?

Yes Date of contact \_\_\_\_\_ Name of contact \_\_\_\_\_

Method of contact:

By Phone at \_\_\_\_\_

By Email (please provide email copies with dispute form)

What was the merchant's response? \_\_\_\_\_

No (If no, you must contact the merchant now before proceeding with this form.)

Did merchant agree to issue credit?

Yes, within \_\_\_\_\_ days, confirmation # \_\_\_\_\_

No – Please explain \_\_\_\_\_

Check the one box below that best describes your dispute:

1. I was billed twice for the same transaction on my Robins Debit/Credit card. I authorized only one charge of \$ \_\_\_\_\_.

2. I paid for goods or services by other means, but it also cleared through my debit/credit card. You must provide proof of other payment method to process your dispute. (For example, a copy of your cancelled check, cash receipt, or other card statement is needed to process your dispute.)

3. My debit/credit receipt shows \$ \_\_\_\_\_ but I was billed \$ \_\_\_\_\_ in error. A copy of your receipt is required to process your request.

4. I have not received the merchandise/services requested from the merchant listed below. I expected my merchandise/service to be delivered on (date) \_\_\_\_\_. Please describe what you ordered \_\_\_\_\_

Merchant is unwilling or unable to provide merchandise/service. Please provide the shipping address for this merchandise \_\_\_\_\_

5. I have not received credit for cancelled merchandise/service. What was purchased? \_\_\_\_\_ For cancelled services, why did you cancel? \_\_\_\_\_ Date Cancelled \_\_\_\_\_ Spoke with \_\_\_\_\_ Cancellation # \_\_\_\_\_ I was advised of the cancellation policy.  Yes  No

6. I have not received credit for returned merchandise. Date returned \_\_\_\_\_ RMA # \_\_\_\_\_ Package returned using:  US Postal Svc  UPS  FEDEX  Other \_\_\_\_\_ Return package tracking # \_\_\_\_\_ (Note - Not providing tracking information could affect the outcome of your case.)



7. **Merchandise/services received were not what I expected.**  
 What did you order? \_\_\_\_\_  
 What did you expect the product or service to do? \_\_\_\_\_  
 \_\_\_\_\_  
 What did you actually receive? \_\_\_\_\_  
 \_\_\_\_\_  
 How is this not what you expected? \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

8. **I received damaged/defective merchandise.**  
 What did you order? \_\_\_\_\_  
 Describe damage or defect \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

**Have you returned the merchandise?**  
 Yes, on \_\_\_\_\_ the return tracking # is \_\_\_\_\_  
 No, please explain \_\_\_\_\_

9. Other. If your dispute does not fall into one of the above items, please provide a detailed letter describing your dispute on a separate piece of paper.

**Cardholder Information**

Name \_\_\_\_\_ Account # \_\_\_\_\_  
 Card # used for purchase \_\_\_\_\_  
 Merchant Name \_\_\_\_\_  
 Date of Transaction \_\_\_\_\_ Amount \_\_\_\_\_

I may be contacted by phone at \_\_\_\_\_ or by email at \_\_\_\_\_ during normal business hours.

**By signing below, I understand that if I do not provide the required information/documentation, my dispute credit may be delayed. I also understand that additional information/documentation may be requested to process my case. I have contacted the merchant and tried to resolve this dispute, before contacting Robins Financial Credit Union.**

Signature \_\_\_\_\_ Date \_\_\_\_\_

**Submit a completed form to the following:**

**Fax:** 478-322-7306

**Email:** [cardservices@robinsfcu.org](mailto:cardservices@robinsfcu.org)

**Mail:** PO Box 6849, Warner Robins, GA 31095

<b>For RFCU Use Only:</b>		
_____	_____	_____
<b>Employee Name</b>	<b>Teller #</b>	<b>Extension</b>