



Cardholder Dispute Form Instructions

Use this form to dispute authorized purchases on signature and PIN transactions made using your West Virginia Central Visa Debit Card.

IMPORTANT – Visa regulations **require** that an attempt to contact the merchant to resolve the dispute must be made **PRIOR** to completing this form.

Answer the following questions. If you answer **YES** to any of the questions complete the **Cardholder Dispute Form** in its entirety using the instructions below.

- | | | |
|--|-----|----|
| 1. The charge in question was a single transaction but posted twice from my account. | Yes | No |
| 2. Although I did make a transaction at the merchant, I am disputing the amount charged. | Yes | No |
| 3. I have not received the merchandise which should have been shipped to me. | Yes | No |
| 4. I notified the merchant to cancel the pre-authorized order. | Yes | No |
| 5. Was this a fraud transaction? | Yes | No |

ITEMS NEEDED TO PROCESS A CHARGEBACK

- Complete the Cardholder Dispute Form
- Your debit card will be blocked and a new debit card will be ordered for you. You will receive the new debit card in 7 to 10 business days.
- A police report may be required depending on the type of transaction.

West Virginia Central Federal Credit Union will re-credit your account promptly upon receipt of the completed required forms. In the event the merchant denies our claim and provides supporting documentation we will notify you prior to reversing the credit on your account.

Return the completed Cardholder Dispute Form in person at any office, by fax 304-865-8620 or by mail to:
West Virginia Central Federal Credit Union Attn: Accounting Department, 1306 Murdoch Ave., Parkersburg,
WV 26101

Cardholder Disputed Item Statement

Name:	Home Phone:
Street Address:	Work Phone:
City, State, Zip:	Card Number:
Email:	EMV Chip Card? Yes <input type="checkbox"/> No <input type="checkbox"/>

Type of Loss: Lost Stolen Card was in my possession at the time the transaction(s) occurred.

I have examined the charge(s) on my account and question the following transaction(s):
(Attach additional sheets if necessary.)

Merchant Name:	Amount:	Transaction Date:

The following explains my dispute:

- I received a price adjustment (credit slip) on the above transaction and it has not appeared on my statement. I have included a photocopy of the credit slip.
- I certify that only one transaction was made with the above referenced merchant. On my statement, the same merchant has processed a second charge to my account, which I neither participated in nor authorized.
- I certify that I participated in the above transaction, but have not received the merchandise. (Describe in detail the merchandise or services you expected to receive, the expected date of delivery, and any attempts to resolve the matter with the merchant on the additional space provided)
- I certify that I participated in the above transaction, but have returned the merchandise/cancelled services on _____ (date) per the merchant’s instructions and have not received credit. (Merchant cancellation policies may apply; please provide full details on the additional space provided.)
- I contacted the merchant on _____ and canceled the monthly recurring transaction. (Merchant cancellation policies may apply; please provide full details on the additional space provided.)
- I contacted the merchant on _____ and canceled my reservation. (Please provide full details on the additional space provided.)
 - My cancellation number is _____
 - I was not given a cancellation number.
- The shipped merchandise I received is defective. (Describe in the additional space the defect or damage and attempts to return the merchandise, and the merchant’s response.)
- The merchandise/services were not as described. (If purchase was made over the phone please indicate what was not as described. Otherwise, please provide written documentation as to what was not as described. ie: color, quantity, etc.)
- I would like a copy of the sales draft. (Reason for request)

Cardholder Disputed Item Statement

I certify that the charge(s) was (were) not made by me or by a person authorized by me to use my card, nor were the goods or services represented by the above transaction received by myself or by a person authorized by me. **(Your card will be blocked.)**

Other. Describe below. Descriptions of transactions should be typed or written clearly. (Attach additional sheets if necessary.)

In dispute cases except those related to lost/stolen/counterfeit cards, you may be required to make an attempt to resolve the dispute with the merchant prior to filing a dispute. Please describe your attempt to resolve in the following sections:

Attempt to Resolve Information:

- I have made an attempt to resolve with the merchant. (check one) YES NO
- Date of contact: _____
- Contact method: Telephone E-mail In-person Other(describe) _____
- Merchant’s response:

- If no attempt, why not?

Additional Comments:

Cardholder Signature _____ **Date:** _____