



### FRAUDULENT TRANSACTION DISPUTE FORM

Name: \_\_\_\_\_ Visa card number: \_\_\_\_\_

I certify that my Visa card was: (select one)

- Lost (0)
- Stolen (1)
- Card not received (2)
- Counterfeit (4)
- Card is still in my possession (6)

The following transactions were not made by me or anyone authorized to use my Visa card:

1. Date: \_\_\_\_\_ Amount: \_\_\_\_\_ Merchant: \_\_\_\_\_
2. Date: \_\_\_\_\_ Amount: \_\_\_\_\_ Merchant: \_\_\_\_\_
3. Date: \_\_\_\_\_ Amount: \_\_\_\_\_ Merchant: \_\_\_\_\_
4. Date: \_\_\_\_\_ Amount: \_\_\_\_\_ Merchant: \_\_\_\_\_
5. Date: \_\_\_\_\_ Amount: \_\_\_\_\_ Merchant: \_\_\_\_\_
6. Date: \_\_\_\_\_ Amount: \_\_\_\_\_ Merchant: \_\_\_\_\_
7. Date: \_\_\_\_\_ Amount: \_\_\_\_\_ Merchant: \_\_\_\_\_
8. Date: \_\_\_\_\_ Amount: \_\_\_\_\_ Merchant: \_\_\_\_\_
9. Date: \_\_\_\_\_ Amount: \_\_\_\_\_ Merchant: \_\_\_\_\_
10. Date: \_\_\_\_\_ Amount: \_\_\_\_\_ Merchant: \_\_\_\_\_

- I complete the Cardholder Dispute form for the purpose of establishing the fraudulent use of my Credit/Debit/ATM card(s).
- I did not give, sell, or trade my card(s) to anyone nor did I give anyone permission to use my card(s).
- I have no knowledge that my spouse or minor child(ren) made any transaction(s) on or after the date of the first fraudulent transaction(s).
- I did not receive any benefit from the unauthorized use of my Credit/Debit/ATM card(s).
- I did not use my card nor authorize the use of my card by anyone else after I discovered the unauthorized use of my card.
- I have examined all of the unauthorized transactions and in each instance I did not originate the transaction nor authorize it.
- Further, I did not receive proceeds or benefits from any of these transactions.
- I give my consent to have this dispute/claim reviewed by a credit union investigator and understand that I may be asked to provide additional details for this investigation.
- I understand that incomplete or inaccurate information could result in the decline of my dispute.

\_\_\_\_\_ I understand I will be charged \$25 per transaction that is shown to be a charge I authorized.

(Please Initial)

I give my consent to University Federal Credit Union to release any information regarding my card and/or card account to any local, state, and/or federal law enforcement agency so that the information can, if necessary, be used in the investigation and/or prosecution of any person(s) who may be responsible for fraud involving my card and/or account. Include a copy of the Police Report if total dollar amount exceeds \$500. I swear this Cardholder Dispute Form is true and understand that making a false sworn statement is subject to Federal and/or State statutes and may be punishable by fines and/or imprisonment.

\_\_\_\_\_  
Cardholder signature

\_\_\_\_\_  
Date

Institution use only:

Submitted by:

**Additional Fraud: (attach separate sheet as needed)**

- 11. Date: \_\_\_\_\_ Amount: \_\_\_\_\_ Merchant: \_\_\_\_\_
- 12. Date: \_\_\_\_\_ Amount: \_\_\_\_\_ Merchant: \_\_\_\_\_
- 13. Date: \_\_\_\_\_ Amount: \_\_\_\_\_ Merchant: \_\_\_\_\_
- 14. Date: \_\_\_\_\_ Amount: \_\_\_\_\_ Merchant: \_\_\_\_\_
- 15. Date: \_\_\_\_\_ Amount: \_\_\_\_\_ Merchant: \_\_\_\_\_
- 16. Date: \_\_\_\_\_ Amount: \_\_\_\_\_ Merchant: \_\_\_\_\_
- 17. Date: \_\_\_\_\_ Amount: \_\_\_\_\_ Merchant: \_\_\_\_\_
- 18. Date: \_\_\_\_\_ Amount: \_\_\_\_\_ Merchant: \_\_\_\_\_
- 19. Date: \_\_\_\_\_ Amount: \_\_\_\_\_ Merchant: \_\_\_\_\_
- 20. Date: \_\_\_\_\_ Amount: \_\_\_\_\_ Merchant: \_\_\_\_\_
- 21. Date: \_\_\_\_\_ Amount: \_\_\_\_\_ Merchant: \_\_\_\_\_
- 22. Date: \_\_\_\_\_ Amount: \_\_\_\_\_ Merchant: \_\_\_\_\_
- 23. Date: \_\_\_\_\_ Amount: \_\_\_\_\_ Merchant: \_\_\_\_\_
- 24. Date: \_\_\_\_\_ Amount: \_\_\_\_\_ Merchant: \_\_\_\_\_
- 25. Date: \_\_\_\_\_ Amount: \_\_\_\_\_ Merchant: \_\_\_\_\_
- 26. Date: \_\_\_\_\_ Amount: \_\_\_\_\_ Merchant: \_\_\_\_\_
- 27. Date: \_\_\_\_\_ Amount: \_\_\_\_\_ Merchant: \_\_\_\_\_
- 28. Date: \_\_\_\_\_ Amount: \_\_\_\_\_ Merchant: \_\_\_\_\_
- 29. Date: \_\_\_\_\_ Amount: \_\_\_\_\_ Merchant: \_\_\_\_\_
- 30. Date: \_\_\_\_\_ Amount: \_\_\_\_\_ Merchant: \_\_\_\_\_
- 31. Date: \_\_\_\_\_ Amount: \_\_\_\_\_ Merchant: \_\_\_\_\_
- 32. Date: \_\_\_\_\_ Amount: \_\_\_\_\_ Merchant: \_\_\_\_\_
- 33. Date: \_\_\_\_\_ Amount: \_\_\_\_\_ Merchant: \_\_\_\_\_
- 34. Date: \_\_\_\_\_ Amount: \_\_\_\_\_ Merchant: \_\_\_\_\_
- 35. Date: \_\_\_\_\_ Amount: \_\_\_\_\_ Merchant: \_\_\_\_\_