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Debit Dispute Investigation Request

Type of Investigation: Merchant Dispute

- * Non-Receipt Merchandise/Service
- * Merchandise/Service Not as Described
 - * Charged after Cancellation
 - * Paid by Other Means
- * Charged Incorrect Amount

Detailed Letter of Explanation: Merchant Dispute

Dispute Letter must include the following:

- * date of transaction * merchant name
- * dollar amount * reason for dispute
- * date member contacted merchant and merchant response
 - * copies of receipts/contracts/emails
 - * if applies cancellation policy/documents
 - * any other pertinent information

Name: _____ Date: _____

Member #: _____

Deposit Account #: _____

Debit Card Number: 4155 - 3900 - _____ - _____

Address: _____

E-Mail Address: _____

Phone (Home): _____ Phone (Cell): _____

Please check **ONE** statement that pertains to the dispute being filed and provide the information requested from your (the cardholder's) point of view:

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

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

- What was purchased? _____
- What is original transaction date and dollar amount _____
- What is date of duplicate charge _____

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

- What was purchased? _____
- Paid by:(Circle One) Check – Cash - Another Credit Card - Other _____

****Please provide a copy of your cash receipt, the front and back of your cancelled check or a copy of your statement if another credit card was used****

Cancelled (I was charged for something I previously cancelled)

- What was purchased? _____
- _____
- Were you advised of the merchant's cancellation policy? _____
- If so, how were you advised? _____
- _____
- What was your method of cancellation? (Circle One) Phone – Mail - Email - Other _____
- Date of cancellation: _____
- Cancellation number and/or name of person you spoke with: _____

****If you cancelled by email, please provide a copy of the email correspondence****

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: _____

***Be sure to describe how the merchandise you received was different from what was ordered ***

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 cancelled or attempted to cancel the service: _____

- Was merchandise received with the service? _____
If yes, please provide the 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: _____

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? _____

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 cancelled: _____

- If credit is for merchandise, please provide:

(1) Date you returned the merchandise or made it available for pick up _____

(2) Return authorization number or cancellation number if available _____

(3) Tracking number for returned merchandise: _____

****Please provide a copy of the return receipt or proof of return, such as a postal receipt if applicable****

Member Signature _____ Date _____

Debit Card Number: 4155 - 3900 - ____ - ____ - ____ - ____