

IN CASE OF A DISPUTE OR QUESTION ABOUT YOUR STATEMENT - If you believe that an entry on your account is wrong, or if you need more information about a transaction, please complete and sign this form and fax it to Tyndall Federal Credit Union, attn: Visa Department at (850) 784-1377. You may also write to us (on a separate sheet of paper) at P.O. Box 59760, Panama City, Florida, 32412-0760. YOU MUST CONTACT US WITH THE REQUIRED INFORMATION NO LATER THAN 60 DAYS AFTER WE SENT YOU THE FIRST STATEMENT ON WHICH THE DISPUTED TRANSACTION APPEARED. You may telephone us, but doing so does not preserve your rights.

Name _____ Card Number _____

Merchant Name _____ Reference Number _____

Transaction Date _____ Transaction Description _____

Posting Date _____ Amount _____

****Check only ONE of the boxes below. Signature and date must be completed. Provide a detailed statement explaining why the merchant was unable to assist you with the transaction. Include supporting documentation. Documentation includes details of order, terms and conditions and return policy, copies of e-mails to/from the merchant and detailed notes from phone contact.****

- I certify that the charge(s) listed above was not made by me nor a person authorized by me to use my card. I did not receive any goods or services from this transaction nor did any person authorized by me.
- Although I did engage in a transaction with the above merchant, I have no knowledge of the particular transaction noted above and it was not authorized by me or anyone representing me.
- My cards were in my possession at the time of the above transaction. The correct transaction took place on _____ (date) in the amount of \$_____.
- Although I did engage in the above transaction (complete ONE of the following statements and provide as much detail as possible to support your statement):
 - The dollar amount of the sale was increased from \$_____ to \$_____. I am enclosing a copy of my charge card sales receipt, which reflects the correct dollar amount.
 - I dispute the entire charge or a portion of it in the amount of \$_____. I have contacted the merchant and asked that a credit be applied to my account. (Please provide details of the circumstances surrounding this transaction and your calculations used to derive the correct amount, if amount is less than the total billed to your account.)
 - I have never received the merchandise. I expected to receive it during the week of _____ (date). I have since contacted the merchant and asked that a credit be applied to my account.
 - All or part of the shipped or delivered merchandise was defective or damaged when received. I returned the merchandise on _____ (date) but have not received a credit for the amount of \$_____. I am enclosing a detailed statement describing the defects of the merchandise and I am enclosing a copy of my **proof of return** (receipt from UPS, FedEx, Post Office, a credit voucher from the merchant, etc.). In addition, enclosed is an itemized list of the merchandise received, the items returned and the cost of each item.
 - The above transaction is a duplication of an authorized transaction that took place on _____ (posting date). The reference number of the authorized transaction as shown on my Visa statement is _____.
- I received a credit slip, but it was applied to my account as a charge. I am enclosing a copy of this credit slip.
- I have received a credit slip, but it was not applied to my account. I am enclosing a copy of this credit slip.
- I have notified the merchant on _____ (date) to cancel pre-authorized recurring charges (i.e., insurance premium, membership fee). I have cancelled with the merchant and am enclosing a copy of my dated correspondence to the merchant (if available). Cancellation number _____ (if available).
- I guaranteed a hotel reservation for late arrival and subsequently cancelled it on _____ (date) at _____ (a.m./p.m.) with cancellation number_____. (If no cancellation number was given, please provide a copy of a phone bill showing the date and time the call was made to cancel the reservation.)
- Airline Ticket Dispute:** I have cancelled or returned the above identified airline ticket. I understood at the time of ordering that it was fully refundable if I chose to cancel. **(This applies if you were issued a paper ticket and must be able to enclose proof of return or credit voucher issued by the merchant.)**

Signature:

Date:

For questions regarding transactions, general assistance, or to report lost or stolen cards, please contact us at one of these numbers:

Toll Free: 888-896-3255 - Local (Panama City, Florida): 850-769-9999

Teller Initials: _____ Ext: _____