

# Cardholder Statement of Dispute Item – Non Fraud

Cardholder Name \_\_\_\_\_

Date \_\_\_\_\_

Card Number \_\_\_\_\_

Phone Number \_\_\_\_\_

Transaction Date \_\_\_\_\_

\$ Transaction Amount \_\_\_\_\_

Merchant \_\_\_\_\_

I am disputing the above charge due to one of the reasons listed below (**select only one dispute reason**). The dispute is either a Cancellation/Return or a Processing Error or Travel & Entertainment.

## Cancellation & Returns (check only one):

- On (date) \_\_\_\_\_ I **cancelled** the (**check one**):  Service OR  Merchandise  
Cancellation method was (**check one**):  In Person  In Writing  By Phone  By Email
- On (date) \_\_\_\_\_ I **returned** the (**check one**):  Service OR  Merchandise  
Return method was (**check one**):  In Person  FedEx  UPS  DHL  United Postal Service
- Other (explain): \_\_\_\_\_
- I did not receive (**check one**):  Service OR  Merchandise that was to be provided on (date): \_\_\_\_\_

## Processing Errors (check only one):

- The amount billed was incorrect. Enclosed is a copy of my sales receipt. The correct amount is: \$ \_\_\_\_\_
- The charged listed above was paid previously by another method. Enclosed is proof of payment.
- I have not received a credit to my account for the transaction. Enclosed is a copy of the credit receipt that was issued.
- The charge listed was a single transaction but posted \_\_\_\_\_ times to my account.

## Travel & Entertainment (check only one):

- I am disputing a guaranteed reservation service and no show charge. My reservation date was for (date): \_\_\_\_\_  
The cancellation numbers is \_\_\_\_\_ and date of cancellation was \_\_\_\_\_
- I am disputing the vehicle rental charge for \$ \_\_\_\_\_. I returned the vehicle on (date) \_\_\_\_\_

## To process the dispute above, the following information **MUST** be provided: (If the following information is not complete, provisional credit may be reversed.)

I attempted to resolve this dispute on (date): \_\_\_\_\_ and spoke with: \_\_\_\_\_

The merchant's response to my attempt was: \_\_\_\_\_

Cardholder Signature \_\_\_\_\_

Date \_\_\_\_\_

Please send this form along with any other required documentation (i.e. Driver's License) to WGLFCU Card Services Department. You may email this form to [information@wglfcu.org](mailto:information@wglfcu.org), mail to P.O. Box 1607, Springfield, VA 22151, or bring into the Springfield Branch.



