***NOTICE****: The following has been provided by WBA committee and section volunteers for use by member banks.   
It should be reviewed and revised as appropriate to the user-bank’s own policies, procedures, and practices.*

**[Before use, the user of this form must modify it by removing and completing the bracketed sections, adding bank letterhead, and any additional necessary customizations to ensure the template is accurate and reflective of bank’s own requirements.]**

**[For use on Bank Letterhead]**

Originated By: \_\_\_\_\_\_\_\_\_\_

Branch: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**DEBIT/ATM CARD DISPUTED TRANSACTIONS FORM**

**INSTRUCTIONS: This form is for reporting ATM/Debit Card Disputed Transactions and Errors**

∗*Complete all sections for all errors and disputed transactions.*

∗*Print and sign the form.*

∗*Return the signed form to your banker.*

**CUSTOMER INFORMATION**

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

ATM/Debit Card # \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Business Name (Business Debit Only): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

I am disputing the attached charge(s) for the following reason(s): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

r ATM error. Amount of cash requested $\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_; Amount of cash received $\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

r My account was charged multiple times for the same transaction.

r I have not received the merchandise (or service) for which I paid, and I have contacted the merchant on \_\_\_\_\_\_\_\_\_(date) in an attempt to resolve this issue. Expected delivery date was \_\_\_\_\_\_\_\_\_\_\_\_\_(date).

r I have returned merchandise to merchant on \_\_\_\_\_\_\_\_\_\_\_(date). Method of return: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Reason for return: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

r My sales receipt is for the amount of\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ , but the charge appeared on my statement in the amount of \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_*. Attach copy of merchant receipt.*

r I notified \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (merchant) on \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_(date) to cancel this transaction. Merchant's response: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Method of cancellation: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Cancellation number: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**I understand that [BANK NAME] will issue provisional credit for the amount I am disputing. If research determines I am in fact responsible for the charges listed, the provisional credit will be reversed.**

Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_