

# DISPUTE DEBIT CARD CHARGES

Cardholder Name: \_\_\_\_\_ GCU Account #: \_\_\_\_\_

Last 8 digits of debit card: \_\_\_\_\_ Contact Phone Number: \_\_\_\_\_

1. Was the card in your (the members') possession at the time of the transaction?    YES    NO

2. Please write why you are disputing these transactions:

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3. List transactions individually. Use separate sheet if necessary.

Date Posted: \_\_\_\_\_ \$ \_\_\_\_\_ Merchant: \_\_\_\_\_

Date Posted: \_\_\_\_\_ \$ \_\_\_\_\_ Merchant: \_\_\_\_\_

Date Posted: \_\_\_\_\_ \$ \_\_\_\_\_ Merchant: \_\_\_\_\_

Date Posted: \_\_\_\_\_ \$ \_\_\_\_\_ Merchant: \_\_\_\_\_

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Date Posted: \_\_\_\_\_ \$ \_\_\_\_\_ Merchant: \_\_\_\_\_

Date Posted: \_\_\_\_\_ \$ \_\_\_\_\_ Merchant: \_\_\_\_\_

Date Posted: \_\_\_\_\_ \$ \_\_\_\_\_ Merchant: \_\_\_\_\_

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