

Pacific Oaks FCU
P O Box 6004
Camarillo, Ca. 93011-9886
Fax: 805-384-1860

VISA Notification of Disputed Transaction(s)

Cardholder Name _____
Cardholder Address _____
City State Zip Code _____

Total Dispute Amount: _____
Home Phone: () _____ - _____
Work Phone: () _____ - _____

If a transaction appears on your statement that you believe is an error, and you have been unable to resolve the situation with the merchant, please complete and sign a copy of this form using blue or black ink. This form must be received at the P O Box stated above **within 60 days of the closing date as printed on your statement**. Please include a copy of your statement highlighting the disputed transaction(s) and send to the P O Box stated above.

I contacted _____ (Merchant Name) on ___/___/___ (mm/dd/yy) in an attempt to resolve this dispute

- I certify that the charge listed above was not made by me or a person authorized by me to use my card. In addition, neither I, nor anyone, authorized by me received the goods or services represented by this charge.
- I certify that I did not participate in nor authorize the above referenced mail order or telephone order transaction(s). I understand that no signed or imprinted sales slip is available for verification purposes.
- Although I did participate in a transaction with the _____ (Merchant Name) I was billed for _____ transaction(s) totaling \$_____ that I did not participate in, nor did anyone else authorized to use my card. I do have all my cards in my possession. Enclosed is a copy of my sales slip for the valid charge.
- I have not received the merchandise that was to have been shipped to me. Expected date of delivery was ___/___/___ (mm/dd/yy). I contacted the merchant on ___/___/___ (mm/dd/yy), and the merchant's response was _____.
(In order to assist you more effectively, you must contact the merchant and inform us of their response. A dispute should not be filed if the current date does not exceed expected delivery date)
- I have returned the merchandise on ___/___/___ (mm/dd/yy) because _____.
Please provide a copy of the return receipt or proof of purchase
- The attached credit slip was listed as a charge on my statement.
- I was issued a credit slip for \$_____ on ___/___/___ (mm/dd/yy) which did not appear on my statement. A copy of my credit slip is enclosed.
- Merchandise, which was shipped to me, arrived damaged and or defective on ___/___/___ (mm/dd/yy). I returned it on ___/___/___ (mm/dd/yy). A copy of my credit slip and/or postal receipt is enclosed.
- I have been billed an incorrect amount. My credit card receipt shows \$_____. However I was billed \$_____. (Please send a copy of your sales receipt.)
- I have been billed more than once for the same transaction. I authorized only one charge with the merchant for \$_____. (Please send a copy of your sales receipt.)
- I notified the merchant on ___/___/___ (mm/dd/yy) to cancel the pre-authorized order (reservation). My cancellation number is _____. I was/was not (circle one) informed of the cancellation policy when I made the reservation. The reason I cancelled was _____. (If you do not have a cancellation number, please provide a copy of your phone bill showing the date and time of the cancellation call.)
- I cancelled the subscription/membership (circle one) which was charged to my account by the above referenced merchant on ___/___/___ (mm/dd/yy). I cancelled the charge prior to the transaction date.
- The transaction was paid by other means. (Please provide a copy of your cash receipt, or the front and back of your cancelled check or a copy of your statement if another credit card was used.)

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