



CARDHOLDER AFFIDAVIT

CARDHOLDER INFORMATION

Name: _____ Account Number: _____

Card Number: _____ Cardholder Signature: _____

I understand that knowingly making a false sworn statement is subject to federal and/or state statutes and may be punishable by fines and/or by imprisonment. _____ **(Initials Required)**

DISPUTED TRANSACTIONS

Please list all disputed transactions

Merchant Name _____ Amount _____ Date _____

Merchant Name _____ Amount _____ Date _____

Merchant Name _____ Amount _____ Date _____

CLAIM INFORMATION

Please check the appropriate box below that matches your dispute type the closest. Please answer all appropriate questions related to your dispute, if a question is marked with an asterisk it is required.

FRAUD

I did not authorize/participate this transaction – I certify that I did not authorize or participate in this transaction with the above-mentioned merchant(s), nor did I authorize anyone else to use my card.

Were you in possession of the card at the time of the transaction? Yes No

If your card was lost/stolen, please answer the following two questions

1. When did you notice your card was lost/stolen? _____
2. When did you report your card lost/stolen? _____

What was your last authorized transaction? (Include Name of merchant, date and amount)

In your own words, explain what happened

DISPUTE

Cancellation Dispute

- Were you advised of any cancellation policy? * Yes No
- Date of cancellation *? _____ Representation Name *: _____
Method of contact *: Phone Email Fax Cancellation Number *: _____
Reason for cancellation: _____
 - You **MUST** provide proof of return (i.e. tracking number, receipt)

Merchandise/Service Dispute

- **Merchandise was returned**
 - When was the item returned? _____
 - Reason for Return _____
 - Date of the return _____
 - You **MUST** provide proof of return (i.e. tracking number, receipt)
- **Quality of merchandise/service**
 - Describe what was received versus what was ordered

 - Did you return the item? Yes No
 - If returned, when _____ (date)
 - Did you contact the merchant? Yes No
 - What was the merchant's response?

 - You **MUST** provide proof of return (i.e. tracking number, receipt)
- **Merchandise/service not received**
 - Expected date of delivery _____
 - Describe the item/service that was expected

 - Did you contact the merchant? Yes No
 - What was the merchant's response?

Billing Errors

- I was billed twice for a single purchase
 - First Charge _____ Post date _____
 - Second Charge _____ Post date _____
- I paid by other means Cash Same card Number Different card number
- I was overcharged for purchase
 - You **MUST** provide proof of paid by other means (i.e. cash receipt, billing statement)