



VISA DISPUTE FORM

Name: _____ Joint Name: _____

Account #: _____ Card Number: _____

Phone #: _____ Number of Cards Issued: _____

The undersigned hereby declares that the checking/visa statement has been carefully examined and that the following described transactions were not made by myself or the joint member.

Table with 3 columns: DATE, MERCHANT, AMOUNT. Includes four rows of blank lines for data entry.

IN ORDER TO RECEIVE PROVISIONAL CREDIT -- PLEASE COMPLETE ALL INFORMATION

The undersigned had possession of the Debit /Visa card indicated above at the time the described transaction(s) took place. Yes _____ No _____

The Debit/Visa card indicated above was lost/stolen on _____
The loss/theft was reported to the CERTIFIED FEDERAL on _____.
The circumstances of the loss/theft were as follows:

Two horizontal lines for providing details on the loss/theft circumstances.

The undersigned authorized, and or participated in the transaction(s). Yes ___ No ____
(If you answered "yes", please complete section below)

The undersigned initiated the transaction on _____,
The services were cancelled on _____
Products received from the merchant were returned on _____. Via _____
Briefly explain: _____

Horizontal line for providing details on the transaction.

I DECLARE UNDER PENALTY OF PERJURY THAT THE FOREGOING IS TRUE AND CORRECT.
I WILL ALSO COOPERATE WITH CERTIFIED FEDERAL THE FRAUD INVESTIGATION.

MBR SIGNATURE: _____

JOINT SIGNATURE: _____

BOTH SIGNATURES REQUIRED

DATE: _____

FAX 626-350-1400