Credit Union Debit Card Disputed Transaction Form



First Name:	Surname:
*Last 4 Digits of Debit Card:	Transaction Date: (dd/mm/yyyy)
Retailer Name:	
Transaction Amount:	Cashback Amount:
1. Duplicate Transaction	6. I do not recognise a transaction
No documentation required, however, please tick this box to confirm that this is the reason for your dispute.	Proof that you have tried to resolve the matter with the retailer.
2. I have not received the service/merchandise e.g. ATM Cash / Company Liquidation? Non receipt of Goods/service.	Note: Does not apply to Chip and Pin verified transactions or 3D Secure.
(please supply all items listed below & tick box to confirm item required is attached)	7. Free Trials: (if you authorised postage charges in relation to a trail offer unless you cancel the authority, the company will continue to debit your account and send you goods.) (please supply all items applicable & tick box to confirm item enclosed)
Proof that you have tried to resolve the matter with the retailer. Copies of receipts/invoices/e-mail confirmation/tickets (if none available, please confirm this in writing).	Customer must return the goods to the retailer by registered post – please forward a copy of the registered post receipt along with this form.
Copy of Liquidation notice or proof that you will not receive the merchandise. (emails/letter from retailer).	*Provide copies of any correspondence (letter/emails) you have with this company.
3. The service/merchandise I have received was not as described	8. Other e.g. Car Rentals
or defective.	(please supply all items applicable & tick box to confirm item enclosed)
(please supply all items applicable & tick box to confirm item enclosed) Proof that you have tried to resolve the matter with the retailer	Proof that you have tried to resolve the matter with the retailer.
Copies of receipts/invoices/e-mail confirmation/tickets? (letter/emails etc).	Copies of receipts/invoices/confirmation/Rental Agreement (letter/emails etc.)
Documentation from an expert stating in their opinion the merchandise/service is defective/not as described.	Note: Does not apply to Parking Fines/Traffic violations
Proof that the goods were returned to the retailer (registered postage receipt) or proof that the services were cancelled/rejected by you in writing.	Please note that there are strict timeframes/requirements laid down by Visa Europe/MasterCard International for Issuing Chargebacks. To this end you must contact your Credit Union without undue delay after the transaction posts to your account.
The website address from which the goods were purchased if applicable. No invoice available please confirm in writing.	Please include your Mobile number in the following format if you would like confirmation of receipt of dispute by SMS message.
4. Subscription/Continuous authority transactions that I have cancelled still being charged to my card	Please enter in the format: "+353 87 XXXXXXX' (ROI)
(please supply all items applicable & tick box to confirm item enclosed)	i.e. Country Code + Network Prefix + Number if you would like confirmation of receipt of your dispute by SMS message.
Proof of cancellation in order to charge an item back i.e. e-mails.	+353 (8X) XXXXXXX
5. A Refund that I was promised was not processed after 30 days	
(please supply all items applicable & tick box to confirm item enclosed)	I certify that the above information is accurate to the best of my knowledge.
Proof of promise of refund showing the amount and when it was to be carried out.	Date
PLEASE NOTE: *Only the last 4 digits of a Debit Card should be quoted	This form <u>must</u> be returned to the Credit Union in order to initiate a Chargeback request.

For all disputed transaction cases a member must provide proof that they have tried to resolve the issue directly with the retailer, supplier or company along with a detailed letter advising the nature of the dispute.