

**Bank of Oak Ridge  
Debit Card Dispute Claim Form**

Cardholder Name: _____
Card Number: _____
Account Number: _____ SS #: _____

- Fraud** - I do not recognize the transaction(s).
  - My card is currently in my possession.  My card is not currently in my possession.
  - My card was reported LOST / STOLEN to the bank on \_\_\_\_\_ (date).
  - My Personal Identification Number (PIN) was with my card.
  - A police report was filed on \_\_\_\_\_ (date). No. \_\_\_\_\_
  
- The ATM withdrawal is incorrect**  
The amount requested was \$\_\_\_\_\_, but the amount received was \$\_\_\_\_\_.  
\_\_\_\_\_ (Initial)
  
- Billed the wrong amount**  
I was billed the wrong amount. I was billed \$\_\_\_\_\_, but my receipt states I owed \$\_\_\_\_\_. I have attached a copy of my receipt. \_\_\_\_\_ (Initial)
  
- Payment made by other means**  
I used another form of payment (Circle One: cash / check / credit card / other) for the transaction. I have provided proof of alternate payment. \_\_\_\_\_ (Initial)
  
- Duplicate Payment**  
My account was charged twice for the same transaction. The original charge posted to my account on \_\_\_\_\_ (date). \_\_\_\_\_ (Initial)
  
- Authorized Transaction-Cancelled**  
I did authorize the transaction. I attempted to cancel with the merchant but was still charged. I have provided a copy of my contract or a proof of cancellation.  
\_\_\_\_\_ (Initial)
  
- Authorized Transaction-Merchandise or service(s) not received**  
I did authorize the transaction. I have not received the merchandise or service(s) purchased and 30 days have passed since the date of expected delivery.  
\_\_\_\_\_ (Initial)
  
- Authorized Transaction-Damaged or defective**  
I did authorize the transaction. The merchandise or service(s) received were damaged or defective. I returned, or have attempted to return the merchandise to the merchant for a refund. I have provided a proof of return.  
\_\_\_\_\_ (Initial)

<u>Posting Date</u>	<u>Merchant Name</u>	<u>Amount</u>
	<b><u>Total:</u></b>	

**Description of Incident:** The following description contains all the information that I have concerning the above claim. If, at a later date, I obtain additional information about the incident, I will notify an officer of Bank of Oak Ridge immediately.

I certify that the statement(s) made on \_\_\_\_ day of \_\_\_\_\_, 20\_\_ are true and accurate to the best of my knowledge. I have provided a detailed description of the incident, including my attempt to resolve the dispute with the merchant. I have also provided all required documentation necessary to support my debit card dispute claim.

Cardholder Signature \_\_\_\_\_

Date: \_\_\_\_\_

**Bank Information**

For fraudulent transactions: debit card has been blocked from future transactions.  
*\*\* Fraudulent dispute claims cannot be processed if the card is not closed.*

I have submitted a Sysaid to Deposit Support Services.

Date of Client Contact: \_\_\_\_\_ Date Sysaid Submitted: \_\_\_\_\_

The date of the transaction being disputed is within the allowable timeframe as indicated in the account disclosures.

I have reviewed the facts with the client to ensure we have all information and documentation needed to process the claim in a timely manner.

Branch Member: \_\_\_\_\_ Date: \_\_\_\_\_

Deposit Support Member : \_\_\_\_\_ Date: \_\_\_\_\_

**All documents must be completed and submitted by sysaid to:  
Deposit Operations / Dispute / POS**