

# Card Disputes Cover Sheet

To file a dispute, call (800) 808-6402. Or fax this coversheet along with the completed and signed Card Dispute Form to (513) 900-3543.

Please clearly print all information:

Institution ACRO	_____ EVNC or EVNF _____
Card Number	_____ - _____ - _____ - _____
Cardholder Name	_____
Cardholder Phone #	_____
Cardholder Address	_____
Cardholder City/State/Zip	_____
Transaction Amount	\$ _____
Date of Transaction	_____

**For ATM and PIN-based disputes:** Please scan this coversheet along with the completed and signed Card Dispute Form to ESO Pending and create a tracker.

**For signature-based disputes:** Please fax this coversheet along with the completed and signed Card Dispute Form to (513) 900-3543.

The dispute form should include an explanation of why the charge is being disputed as well as any relevant documentation to support the claim.

# Card Dispute Form

Everence Federal Credit Union



Please complete this dispute form regarding your inquiry on your Everence Federal Credit Union card statement. Upon receipt, we will take the necessary action to resolve this dispute.

## Instructions

1. Fill out the form below. Be sure to include as much information as possible.
2. Attach copies of the relevant receipts.
3. Be sure to sign the form.
4. Fax to Disputes Departments at (513) 900-3543.
5. Questions? Call (800) 451-5719 and select the Card Services department.

Card number \_\_\_\_\_ Cardholder name \_\_\_\_\_  
Cardholder address \_\_\_\_\_  
Cardholder phone number \_\_\_\_\_ Disputed amount \$ \_\_\_\_\_  
Merchant name \_\_\_\_\_  
Merchant location \_\_\_\_\_  
Post date \_\_\_\_\_ Transaction date \_\_\_\_\_

I would like to dispute the above amount for the following reason (check one):

- I neither authorized nor participated in this transaction.
  - My card is in my possession.
  - My card was lost or stolen at the time of the transaction.
- The amount of the transaction is incorrect. My receipt is for \$ \_\_\_\_\_ (attach copy).
- I authorized a transaction with this merchant; however I was billed for an additional transaction that I neither authorized nor participated in.
- The service or merchandise was never received.
- The quality of the merchandise or service were not as they were described.
- The same transaction was posted twice to my account.
- The service or reservation were cancelled. Date of cancellation \_\_\_\_\_
- Shipped merchandise arrived damaged or defective.
- Merchandise was returned but credit was not received. Date of return \_\_\_\_\_
- Paid for this purchase by other means. I have provided:
  - A cash receipt
  - Copies of both sides of a canceled check
  - The credit/debit card statement where the valid charge appears
- Other \_\_\_\_\_

**For ATM disputes** (receipt must be attached for all ATM disputes).

- I acknowledge participation in the ATM transaction, but I did not receive any funds.
- I acknowledge participation in the ATM transaction but received only a portion of my funds.  
I requested \$ \_\_\_\_\_; I received \$ \_\_\_\_\_
- I acknowledge participation in the ATM transaction, but it was posted twice.

continued

**Please describe the details pertaining to your dispute (required):**

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Cardholder signature

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Date

**Everence Federal Credit Union**

2160 Lincoln Highway E., Ste. 20  
Lancaster, PA 17602-1150  
everence.com

Toll-free: (800) 451-5719  
F: (717) 735-8331  
infocu@everence.com